| Fill in this information to identify your o | attach correct PDF  | Page 1 of 58 |
|---|---|--------------|
| United States Bankruptcy Court for the:     |   |              |
| Northern District of Illinois               |   | ,            |
| Case number (if known):                     | Chapter you are filing a Chapter 7 Chapter 11 Chapter 12 Chapter 13 | under:       |
|   |   |              |

Check if this is an amended filing

### Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Your full name  | About Debtor 1:            | About Debtor 2 (Spouse Only in a Joint Case): |
|---|----------------------------|---|
| Write the name that is on your government-issued picture identification (for example, | Ami<br>First name          | UNITED STATES AT TO                           |
| your driver's license or passport).   | M<br>Middle name           | First Habbert AND Province                    |
| Bring your picture identification to your meeting with the trustee.                   | Cutrone Last name          | Made name ULIVOIS                             |
| with the trustee.   | Suffix (Sr., Jr., II, III) | Last name                                     |
| All other names you have used in the last 8   |                            | 3 GERK  |
| years   | First name                 | First name                                    |
| Include your married or maiden names.   | Middle name                | Middle name                                   |
|   | Last name                  | Last name                                     |
|   | First name                 | First name                                    |
|   | Middle name                | Middle name                                   |
|   | Last name                  | Last name                                     |
| Only the last 4 digits of   |                            |   |
| your Social Security number or federal  | - xx - 5 + 2 + 9           | xxx - xx                                      |
| ndividual Taxpayer<br>dentification number<br>ITIN)                                   | 9 xx - xx                  | OR<br>9 xx - xx                               |

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|   | About Debtor 1:   | About Debtor 2 (Spouss Out )  |
|---|---|---|
| 4. Any business names<br>and Employer<br>Identification Numbers<br>(EIN) you have used in | I have not used any business names or EINs.   | About Debtor 2 (Spouse Only in a Joint Case):   |
| the last 8 years  | Business name   | <u> </u>  |
| Include trade names and   |   | Business name   |
| doing business as names   | Business name   |   |
|   |   | Business name   |
|   | EIN   | EIN   |
|   | EIN   |   |
|   |   | EIN   |
| . Where you live  |   | If Debtor 2 lives at a different address:   |
|   | 400 S. ADDISON  | 2 1103 at a unierent address:   |
|   | Number Street   | Number Street   |
|   |   |   |
|   | LOMBARD IL 60148  |   |
|   | DuPage County   | City State ZIP Code   |
|   | County  | County  |
|   | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.                        |
|   | Number Street   | Number Street   |
|   | P.O. Box  |   |
|   |   | P.O. 8ox  |
|   | City State ZIP Code   | City State ZIP Code   |
|   |   | Cuito Zir Code  |
| Vhy you are choosing  | Check one:  |   |
| his district to file for  | Over the last 180 days before \$150 days  | Check one:  |
| his district to file for  | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                    | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in  |
| his district to file for  | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                                | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                                  |
| ills district to file for   | Over the last 180 days before filing this petition, I have lived in this district longer than in any other  | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. |
| his district to file for  | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                                | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                                  |
| his district to file for  | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                                | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. |

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|  | cy Code you for  | theck one. (For a brief or Bankruptcy (Form 20<br>Chapter 7  |   |  |  | C. § 342(b) for Individuals Filoropriate box.  | ling             |
|--|--|--|---|--|--|--|------------------|
|  |  | Chapter 11   |   |  |  |  |                  |
|  |  | Chapter 12   |   |  |  |  |                  |
|  |  | Chapter 13   |   | NASSAKANTA BITA TERMANAKANDANAKANDAN MENDAN KENDAN                     | čilišký kolimit kolimik činnik i kolonik vokonov, koj            |  |                  |
| . How you  | will pay the fee   | I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. |   |  |  |  |                  |
|  |  | I need to pay the  |   |  |  | sign and attach the<br>Official Form 103A).  |                  |
|  |  | I request that my By law, a judge ma less than 150% of pay the fee in insta  | fee be waived (Yo<br>ay, but is not require<br>the official poverty | ou may reques<br>red to, waive y<br>line that appli<br>oose this optio | st this option of<br>our fee, and mes to your famon, you must fi | nly if you are filing for Chanay do so only if your inco-<br>ily size and you are unab<br>Il out the <i>Application to H</i> | ome is<br>ole to |
|  | _  |  |   |  |  |  |                  |
|  | y within the 💢 🖰   | o<br>es. District  | nern TL   |  | When $\frac{q}{}$  | Case number  | 272              |
| bankrupto  | filed for cy within the rs?  | o<br>es. District  | nein TL   |  |  | Case number 7  | 272              |
| bankrupto  | filed for cy within the rs?  | District 1/200 1   | nein TL   |  | When   |  | 272              |
| bankrupto<br>last 8 yea<br>b. Are any b<br>cases per<br>filed by a<br>not filing               | ankruptcy anding or being spouse who is this case with   | District 1/200 1   |   |  | When   | Case number  | 272              |
| . Are any b<br>cases per<br>filed by a<br>not filing   | ankruptcy anding or being spouse who is this case with   | District   |   |  | When   | Case number  | 272              |
| bankrupto<br>last 8 yea<br>b. Are any b<br>cases per<br>filed by a<br>not filing<br>you, or by | ankruptcy anding or being spouse who is this case with a business r by an                                | District  District  District  No  Yes.   |   |  | When   | Case number  |                  |
| o. Are any b<br>cases per<br>filed by a<br>not filing<br>you, or by<br>partner, o              | ankruptcy anding or being spouse who is this case with a business r by an                                | District  District  No  Yes.   |   |  | When   | Case number  |                  |
| 0. Are any b<br>cases per<br>filed by a<br>not filing<br>you, or by<br>partner, o              | ankruptcy ading or being spouse who is this case with a business r by an Debtor                          | District  District  No  Yes.   |   |  | WhenRelation   | Case number Case number  onship to you Case number, if known   |                  |
| o. Are any b<br>cases per<br>filed by a<br>not filing<br>you, or by<br>partner, o              | ankruptcy nding or being spouse who is this case with a business r by an Debtor District Debtor District | District  District  No  Yes.   |   | When   | WhenRelation   | Case number Case number  onship to you Case number, if known   |                  |

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| Pa   | artiSt Report About Any I  | Busines                      | ses You  | Own as a  | a Sole F  | Propriet                                       | tor  |   |                                      |  |                    |
|--|--|------------------------------|--|---|---|--|--|---|--------------------------------------|--|--------------------|
| 12.  | Are you a sole proprietor of any full- or part-time business?  | · ·                          | Go to Part   | t 4.  | of busine   | ess  |  |   |                                      |  |                    |
|  | A sole proprietorship is a<br>business you operate as an<br>individual, and is not a<br>separate legal entity such as<br>a corporation, partnership, or<br>LLC.  |                              | Name of b  | usiness, if a   | ny  | P-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1        |  |   |                                      |  |                    |
|  | If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.  |                              |  |   | · · · · · · · · · · · · · · · · · · ·               |  |  |   |                                      |  |                    |
|  | , ,  |                              | City   |   | -4- 64-   |  |  | State   |                                      | ZłP Code   |                    |
|  |  |                              | p  |   |   |  | e your busir   |   |                                      |  |                    |
|  |  |                              | -  |   |   |  |  | C. § 101(27A  | • •                                  |  |                    |
|  |  |                              |  |   |   |  |  | .S.C. § 101(  | 51B))                                |  |                    |
|  |  |                              | L Stock  | broker (as  | defined   | in 11 U.S                                      | S.C. § 101(5   | 3A))  |                                      |  |                    |
|  |  |                              | L Comr   | nodity Brok   | ker (as d   | efined in                                      | 11 U.S.C. §  | 3 101(6))   |                                      |  |                    |
|  |  |                              | None   | of the abo  | ve  |  |  |   |                                      |  |                    |
| 13.  | Are you filing under<br>Chapter 11 of the<br>Bankruptcy Code and<br>are you a <i>small business</i><br><i>debtor?</i><br>For a definition of <i>small</i><br><i>business debtor</i> , see<br>11 U.S.C. § 101(51D). | can set most re any of t No. | appropriation to a land the se document of a land to the second th | te deadlines<br>ce sheet, s<br>ments do n<br>filing under<br>under Cha<br>ruptcy Code | s. If you statement not exist, Chapter apter 11, e. | indicate it of operit follow th f 11. but I am | that you are<br>ations, cash<br>e procedure<br>NOT a sma | e a small bus<br>i-flow statem<br>e in 11 U.S.C<br>all business o | iness<br>ient, a<br>C. § 11<br>debto | mall business debtor so that it debtor, you must attach your and federal income tax return or if 16(1)(B).  Traccording to the definition in the |                    |
|  |  | , 03.                        | Bankrupto  | cy Code.  | apici : i   | and rain                                       | a siliali bus  | antess depto  | acce                                 | ording to the demindon in the  |                    |
| Pa   | rt 4: Report if You Own o  | or Have                      | Any Haz  | ardous P  | roperty   | y or Any                                       | / Property   | That Nee  | ds Ir                                | nmediate Attention   |                    |
| 14.  | Do you own or have any property that poses or is alleged to pose a threat  | ✓No<br>Yes                   | . What is  | the hazard  | 1?  |  |  |   |                                      |  |                    |
|  | of imminent and identifiable hazard to   |                              |  |   |   |  |  |   |                                      |  |                    |
| -5.5 57  | public health or safety?<br>Or do you own any<br>property that needs<br>immediate attention?   |                              | If immed   | liate attenti   | ion is nee  | eded, wh                                       | y is it neede  | ed?   | ••••••                               |  | us to savuta to or |
| For example, do you own<br>perishable goods, or livestock<br>that must be fed, or a building<br>that needs urgent repairs? |  |                              |  |   |   |  |  |   |                                      |  |                    |
|  | <del>-</del> ,   |                              | Where is   | s the prope   | erty?   |  |  |   |                                      |  |                    |
|  |  |                              |  |   |   |  |  |   |                                      |  |                    |
|  |  |                              |  |   |   |  |  |   |                                      |  |                    |
|  |  |                              |  |   |   |  |  |   |                                      |  |                    |
|  |  |                              |  |   |   |  |  |   |                                      |  | •                  |

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#### Part 5:

#### Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

|   | About Debtor 1:   |   | Al                | bout Debtor 2 (S  | pouse Only in a Joint Case):   |                |
|---|---|---|-------------------|---|--|----------------|
|   | You must check on   | e:  | Y                 | ou must check on  | <del>e</del> :   |                |
| t | counseling age  | efing from an approved credit<br>ency within the 180 days before I<br>ruptcy petition, and I received a<br>ompletion.   | C                 | counseling age  | efing from an approved crec<br>ency within the 180 days bef<br>ruptcy petition, and I receive<br>ompletion.  | оге і          |
|   |   | f the certificate and the payment tyou developed with the agency.   | 1<br>1<br>1       |   | f the certificate and the payme<br>you developed with the agend  |                |
|   | counseling age  | efing from an approved credit<br>ency within the 180 days before I<br>ruptcy petition, but I do not have a<br>empletion.  |                   | counseling age  | efing from an approved crec<br>ency within the 180 days bef<br>uptcy petition, but I do not b<br>empletion.  | ore i          |
|   |   | after you file this bankruptcy petition,<br>I copy of the certificate and payment   | 74<br>7<br>1<br>1 |   | after you file this bankruptcy pe<br>copy of the certificate and pa  |                |
|   | services from a<br>unable to obtai<br>days after I ma     | sked for credit counseling<br>an approved agency, but was<br>in those services during the 7<br>de my request, and exigent<br>merit a 30-day temporary waiver<br>nent.                           |                   | services from a<br>unable to obtai<br>days after I ma   | sked for credit counseling<br>an approved agency, but was<br>n those services during the<br>de my request, and exigent<br>merit a 30-day temporary w<br>lent.                      | 7              |
|   | requirement, att<br>what efforts you<br>you were unable   | day temporary waiver of the ach a separate sheet explaining made to obtain the briefing, why e to obtain it before you filed for what exigent circumstances file this case.                     |                   | requirement, att.<br>what efforts you<br>you were unable  | day temporary waiver of the<br>ach a separate sheet explainir<br>made to obtain the briefing, we to obtain it before you filed fo<br>what exigent circumstances<br>file this case. | 'nу            |
|   | dissatisfied with   | be dismissed if the court is<br>your reasons for not receiving a<br>rou filed for bankruptcy.   |                   | Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. |  |                |
|   | still receive a bri<br>You must file a<br>agency, along w | tisfied with your reasons, you must<br>iefing within 30 days after you file.<br>certificate from the approved<br>ith a copy of the payment plan you<br>y. If you do not do so, your case<br>ed. |                   | still receive a bri<br>You must file a c<br>agency, along w   | tisfied with your reasons, you refing within 30 days after you sertificate from the approved ith a copy of the payment plary. If you do not do so, your casted.                    | file.<br>ı you |
|   |   | f the 30-day deadline is granted<br>nd is limited to a maximum of 15  | N.                |   | f the 30-day deadline is grante<br>nd is limited to a maximum of   |                |
|   | I am not require credit counseli                          | ed to receive a briefing about<br>ng because of:  | Г                 | I am not require<br>credit counseli   | ed to receive a briefing abou<br>ng because of:  | t              |
|   | Incapacity.   | I have a mental illness or a mental deficiency that makes me  | Á                 | Incapacity.   | I have a mental illness or a n<br>deficiency that makes me   |                |
|   |   | incapable of realizing or making rational decisions about finances.   |                   |   | incapable of realizing or mak<br>rational decisions about finar  | ing            |
|   | Disability.   | My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.                                |                   | Disability.   | My physical disability causes<br>to be unable to participate in<br>briefing in person, by phone,<br>through the internet, even aff<br>reasonably tried to do so.                   | a<br>Of        |
|   | Active duty   | . I am currently on active military duty in a military combat zone.   | Š,                | Active duty.  | I am currently on active milita<br>duty in a military combat zon   |                |
|   | briefing about cr   | ou are not required to receive a edit counseling, you must file a er of credit counseling with the court.   |                   | briefing about cr   | u are not required to receive a<br>edit counseling, you must file a<br>r of credit counseling with the   | 3              |
|   |   |   | 1.0               |   |  | :              |

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| Part 6: Answer These Que   | stions for Reporting Purposes   |  |   |   |  |
|--|---|--|---|---|--|
| 16. What kind of debts do you have?  | <ul> <li>16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."  No. Go to line 16b.  Yes. Go to line 17.</li> <li>16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.  No. Go to line 16c.  Yes. Go to line 17.</li> <li>16c. State the type of debts you owe that are not consumer debts or business debts.</li> </ul> |  |   |   |  |
| 17. Are you filing under Chapter 7?  Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | administrative expenses ar  | . Do you estimate that after an  | y exempt property is excluded and ble to distribute to unsecured creditors?   |   |  |
| 18. How many creditors do you estimate that you owe?   | 7 1-49<br>50-99<br>100-199<br>200-999   | 1,000-5,000<br>5,001-10,000<br>10,001-25,000   | 25,001-50,000<br>50,001-100,000<br>More than 100,000  | , and the same of |  |
| 19. How much do you<br>estimate your assets to<br>be worth?  | \$0-\$50,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000<br>\$500,001-\$1 million  | \$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million          |   | 22.00   |  |
| 20. How much do you estimate your liabilities to be?   | \$0-\$50,000<br>\$50,001-\$100,000<br>\$100,001-\$500,000<br>\$500,001-\$1 million  | \$1,000,001-\$10 million<br>\$10,000,001-\$50 million<br>\$50,000,001-\$100 million<br>\$100,000,001-\$500 million | powering .  |   |  |
| Part 7: Sign Below   |   |  |   |   |  |
| For you  | correct.  If I have chosen to file under Chapte   | er 7, I am aware that I may pro  | ry that the information provided is true and ceed, if eligible, under Chapter 7, 11,12, or 13 der each chapter, and I choose to proceed |   |  |
|  | If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).  |  |   |   |  |
|  | I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  |  |   |   |  |
|  | I understand making a false statem-<br>with a bankruptcy case can result in<br>18 U.S.C. §§ 152, 1341, 1519, and  | fines up to \$250,000, or impri  | taining money or property by fraud in connection sonment for up to 20 years, or both.   |   |  |
|  | /s/ Ami M Cutrone   | xi W. Citting *  | wasture of Dahter 2   | i   |  |
|  | Signature of Debtor 1   |  | gnature of Debtor 2   |   |  |
|  | Executed on05/18/2018<br>MM/_DD/YYY   | Y Ex   | ecuted on   | 1   |  |

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Debtor 1

Ami M Cutrone

Last Name

Case number (if known)

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page. The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

| Are you aware that filing for bankruptcy is a serious acticonsequences?  No Yes   | on with long-term financial and legal                                    |
|---|--|
| Are you aware that bankruptcy fraud is a serious crime inaccurate or incomplete, you could be fined or imprisor   No Yes  |  |
| Did you pay or agree to pay someone who is not an atto  ✓ No  ✓ Yes. Name of Person  Attach Bankruptcy Petition Preparer's Notice, Dec.                                   |  |
| By signing here, I acknowledge that I understand the ris have read and understood this notice, and I am aware to attorney may cause me to lose my rights or property if I | nat filing a bankruptcy case without an do not properly handle the case. |
| Date 05/18/2018<br>MM / DD / YYYY   | Date MM / DD / YYYY  |
| Contact phone (708) 800-6991  | Contact phone  |
| Cell phone  | Cell phone   |
| Email address IAMINONYA@GMAIL.COM   | Email address  |
|   |  |

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| Fill in this in     | formation to ide    | entify your case:                      |           |
|---------------------|---------------------|--|-----------|
| Debtor 1            | Ami M Cutro         |  |           |
| J J J               | First Name          | Middle Name                            | Last Name |
| Debtor 2            |                     |  |           |
| (Spouse, if filing) | First Name          | Middle Name                            | Last Name |
| United States E     | Bankruptcy Court fo | r the: Northern District of II         | linois    |
| Case number         |                     |  |           |
|                     | (if known)          | ······································ |           |

#### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| P  | art 1: Summarize Your Assets   |  |
|----|--|--|
| 1. | Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B  | Your assets Value of what you own \$0.00 |
|    | 1b. Copy line 62, Total personal property, from Schedule A/B   | \$ <u>18,800.00</u>                      |
|    | 1c. Copy line 63, Total of all property on Schedule A/B  | \$18,800.00                              |
| R  | art 2: Summarize Your Liabilities  |  |
|    | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D  Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | id And Angel                             |
|    | Your total liabilities   | \$ <u>16,290.00</u>                      |
| P. | Summarize Your Income and Expenses   |  |
|    | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  | \$ <u>0.00</u><br>\$ <u>3,950.00</u>     |

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Ami M Cutrone

Debtor 1

First Name Middle Name

Last Name

Case number (if known)\_

| •       | art 4: Answer These Questions for Administrative and Statistical Record  | 5  |  |
|---------|--|--|--|
| 6.      | Are you filing for bankruptcy under Chapters 7, 11, or 13?   |  |  |
| D-04V4V | ☐ No. You have nothing to report on this part of the form. Check this box and submit this ☐ Yes  | form to the court with your other  | schedules.   |
| 7.      | What kind of debt do you have?   | Y Carrier dan Amerika de Berande de German de German de Berande de Berande de Berande de German de German de G | eter von statistisch in wegen von der gewone von der |
|         | Your debts are primarily consumer debts. Consumer debts are those "incurred by all family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpose. |  | nal,   |
|         | Your debts are not primarily consumer debts. You have nothing to report on this part this form to the court with your other schedules.   | rt of the form. Check this box ar  | d submit   |
| 8.      | From the Statement of Your Current Monthly Income: Copy your total current monthly in Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.                         | ncome from Official  | \$0.00   |
| 9.      | Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:   | Total claim  | акститите при  |
|         | From Part 4 on Schedule E/F, copy the following:   |  |  |
|         | 9a. Domestic support obligations (Copy line 6a.)   | \$   |  |
|         | 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$   |  |
|         | 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$   |  |
|         | 9d. Student loans. (Copy line 6f.)   | \$   |  |
|         | 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)   | \$   |  |
|         | 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)   | + \$   |  |
|         | 9g. <b>Total.</b> Add lines 9a through 9f.   | \$ 0.00  |  |
|         |  |  | and of the   |

| Fill in this information to identify your east and this  | - 40 - ( 50   | 8 12:23:05 Desc to   |
|--|---|--|
| Ami M Cutrone  | ach correct PDF Page 10 of 58   |  |
| Debtor 1 First Name Middle Name  | Last Name   |  |
| Debtor 2<br>(Spouse, if filing) First Name Middle Name   | Last Name   |  |
| United States Bankruptcy Court for the: Northern District of Illin   | ois   |  |
| Case number  |   |  |
|  |   | ☐ Check if this is an amended filing   |
| Official Form 106A/B   |   | amended ming   |
| Schedule A/B: Property   | <i>y</i>  | 12/15  |
| In each category, separately list and describe items category where you think it fits best. Be as comple responsible for supplying correct information. If me write your name and case number (if known). Answers Part 1: Describe Each Residence, Building, | te and accurate as possible. If two married people<br>are space is needed, attach a separate sheet to thi | e are filing together, both are equally<br>is form. On the top of any additional pages,  |
| 1. Do you own or have any legal or equitable interes   | t in any residence, building, land, or similar prop   | erty?  |
| ☑ No. Go to Part 2.  |   |  |
| Yes. Where is the property?  | What is the property? Check all that apply.   | Do not deduct secured claims or exemptions. Put  |
| 1.1.   | Single-family home Duplex or multi-unit building  | the amount of any secured claims on Schedule D. Creditors Who Have Claims Secured by Property:   |
| Street address, if available, or other description   | Condominium or cooperative  | Current value of the Current value of the  |
|  | Manufactured or mobile home   | entire property? portion you own?  |
|  | Land Investment property  | \$   |
| City State ZIP Code  | Timeshare   | Describe the nature of your ownership interest (such as fee simple, tenancy by   |
| Only State Zir Code  | Other   | the entireties, or a life estate), if known.   |
|  | Who has an interest in the property? Check one.   | power production of the state o |
|  | Debtor 1 only   | Check if this is community property  |
| County   | Debtor 2 only  Debtor 1 and Debtor 2 only   |  |
|  | At least one of the debtors and another   |  |
|  | Other information you wish to add about this it   | em, such as local  |
|  | property identification number:   |  |
|  |   |  |
|  |   |  |
| If you own or have more than one, list here:   | What is the property? Check all that apply.   |  |
|  | ☐ Single-family home  | Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D:  |
| 1.2. Street address, if available, or other description  | Duplex or multi-unit building   | Creditors Who Have Claims Secured by Property  |
|  | Condominium or cooperative  | Current value of the Current value of the entire property? portion you own?  |
|  | Manufactured or mobile home Land  | entire property? portion you own?  |
|  | Investment property   | ΨΨ   |
| City State ZIP Code  | Timeshare   | Describe the nature of your ownership  |
|  | Other   | interest (such as fee simple, tenancy by the entireties, or a life estate), if known.  |
|  | Who has an interest in the property? Check one.  Debtor 1 only  |  |
| County   | Debtor 2 only   |  |
| County   | Debtor 1 and Debtor 2 only  | Check if this is community property  |
|  | At least one of the debtors and another   | (see instructions)   |
|  | Other information you wish to add about this item   | n, such as local   |
|  | property identification number:   |  |

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| Street address, if available, or other description  City State ZIP Code  | What is the property? Check all that apply.  Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other Who has an interest in the property? Check one. | Do not deduct secured clathe amount of any secure Creditors Who Have Clair Current value of the entire property?  \$  Describe the nature of interest (such as fee the entireties, or a life.) | ims or exemptions. Put d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$  If your ownership simple, tenancy by |
|--|---|--|---|
| County   | Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other Information you wish to add about this ite property identification number:   | Check if this is co<br>(see instructions)<br>em, such as local   | mmunity property  |
| Add the dollar value of the portion you own for all you have attached for Part 1. Write that number h  Part 2: Describe Your Vehicles  Do you own, lease, or have legal or equitable interes | t in any vehicles, whether they are registered or   | not? Include any vehicles  | <u>\$ 0.00</u>  |
| you own that someone else drives. If you lease a vehicle  3. Cars, vans, trucks, tractors, sport utility vehicles,  No Yes   |   | and Onexpired Leases.  |   |
| 3.1. Make: Dodge  Model: Durang  | Who has an interest in the property? Check one.  ☑ Debtor 1 only ☐ Debtor 2 only  | Do not deduct secured cla<br>the amount of any secured<br>Creditors Who Have Clain   | ims or exemptions. Put<br>I claims on <i>Schedule D</i> :   |
| Year: 2003 Approximate mileage: 189000   | Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  | Current value of the entire property?  | Current value of the portion you own?   |
| Other information: Condition: Poor; Car not running, engine blown  | Check if this is community property (see instructions)  | \$250.00   | \$ <u>250.00</u>  |
| If you own or have more than one, describe here:   |   |  |   |
| Model:  Year:  Approximate mileage:  Other information:  | Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see   | Do not deduct secured cla<br>the amount of any secured<br>Creditors Who Have Clain<br>Current value of the<br>entire property?   | ims or exemptions. Put<br>I claims on Schedule D:<br>Is Secured by Property.  |
|  | instructions)   |  |   |

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| Make:  Model:  Year:  Approximate mileage:  Other information:                          | Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions) | Do not deduct secured cla<br>the amount of any secure<br>Creditors Who Have Clair                                  | d claims on Schedule D:   |
|---|---|--|---|
| Make:  Model:  Year:  Approximate mileage:  Other information:                          | Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions) | Do not deduct secured clatte amount of any secure Creditors Who Have Clain  Current value of the entire property?  | aims or exemptions. Put<br>d claims on Schedule D:<br>ns Secured by Property. |
| Examples: Boats, trailers, motors, personal v  No Yes  4.1. Make: Model:                | who has an interest in the property? Check one.  Debtor 1 only  Debtor 2 only   |  | tims or exemptions. Put dictains on Schedule D:                               |
| Year: Other information:  | Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this is community property (see instructions)  | Current value of the entire property?  | Current value of the portion you own?   |
| If you own or have more than one, list here: 4.2. Make: Model: Year: Other information: | Who has an interest in the property? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another   | Do not deduct secured clathe amount of any secured Creditors Who Have Clain  Current value of the entire property? | d claims on Schedule D:<br>ns Secured by Property.  Current value of the      |
|   | Check if this is community property (see instructions)  | \$   | \$  |
|   | n for all of your entries from Part 2, including any entries  |  | \$ 250.00   |

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#### Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims 6. Household goods and furnishings or exemptions. Examples: Major appliances, furniture, linens, china, kitchenware Beds, Used Couches, Lamps, and Tables □ No Yes. Describe...... <sub>\$</sub> 600.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games Used TV, cellphone, xbox 200.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ☑ No 0.00 Yes. Describe...... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ☑ No \$ 0.00 ☐ Yes. Describe...... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ☑ No \$ 0.00 Tyes. Describe...... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Adult and kids clothing, family pictures 600.00 Yes. Describe...... 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Costume Jewelry s 150.00 Yes. Describe..... 13. Non-farm animals Examples: Dogs, cats, birds, horses √ No 0.00 Yes. Describe...... 14. Any other personal and household items you did not already list, including any health aids you did not list ☑ No 0.00 Yes. Give specific information..... \$ 1,550.00 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

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| Part 4: Describe You                                 | ur Financial A       | ssets  |   |
|--|----------------------|--|---|
| Do you own or have any                               | legal or equitabl    | le interest in any of the following?   | Current value of the portion you own?       |
|  |                      |  | Do not deduct secured claims or exemptions. |
| 16. <b>Cash</b> <i>Examples:</i> Money you h         | have in your walle   | et, in your home, in a safe deposit box, and on hand when you file your petition   |   |
| ☑ No<br>□ Yes  |                      |  | \$  |
|  |                      | inancial accounts; certificates of deposit; shares in credit unions, brokerage houses<br>If you have multiple accounts with the same institution, list each. | ı   |
| ☑ No   | illias Instituțions. | in you have manapic accounts with the same institution, not each.  |   |
| Yes  |                      | Institution name:  |   |
| 17.1. Check  | king account:        |  | \$  |
|  | king account:        |  | \$  |
| 17.3. Saving   | -                    |  | \$  |
| 17.4. Saving   | cates of deposit:    |  | \$  |
|  | financial account:   |  | \$<br>\$                                    |
| 17.7. Other  | financial account:   |  | \$  |
| 17.8. Other  | financial account:   |  | \$  |
| 17.9. Other  | financial account:   |  | \$  |
|  |                      |  |   |
| 18. Bonds, mutual funds, Examples: Bond funds,       |                      | ed stocks<br>unts with brokerage firms, money market accounts  |   |
| Yes  | Institution or iss   | uer name:  |   |
|  |                      |  | <b>\$</b>                                   |
|  | <del></del>          |  | . 5   |
|  |                      |  | . \$  |
|  |                      |  |   |
| 19. Non-publicly traded st<br>an LLC, partnership, a |                      | ts in incorporated and unincorporated businesses, including an interest in   |   |
| ☑ No   | Name of entity:      | % of ownership:  |   |
| Yes. Give specific information about                 |                      | %  | \$  |
| them   |                      | <u> </u>   | \$  |
|  |                      | %  | \$  |
|  |                      |  |   |

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| 20. | Government and corpo   | rate bonds and                          | other negotiable and non-negotiable instruments  |  |
|-----|--|---|--|--|
|     | Negotiable instruments in  | nclude personal o                       | checks, cashiers' checks, promissory notes, and money orders.  a cannot transfer to someone by signing or delivering them.   |  |
|     | -  | nis are mose you                        | realing transfer to someone by signing or delivering them.   |  |
|     | ✓ No  Yes. Give specific   | issuer name:                            |  |  |
|     | information about  |   |  | \$   |
|     | them   |   |  |  |
|     |  |   | ****   | \$<br>\$_  |
|     |  |   |  |  |
| 21. | Retirement or pension  |   |  | ,  |
|     |  | A, ERISA, Keogi                         | h, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans   |  |
|     | ☑ No ☐ Yes. List each  |   |  |  |
|     | account separately.  | Institution na                          | me:  |  |
|     | Type of account:   |   |  | \$   |
|     | 401(k) or similar plar   | 1;                                      |  | \$   |
|     | Pension plan:  | *************************************** |  | \$   |
|     | IRA:   | <u> </u>                                |  | \$   |
|     | Retirement account:  |   |  | \$   |
|     | Keogh:   |   |  |  |
|     | Additional account:  |   |  | \$   |
|     | Additional account:  |   |  | \$   |
|     |  |   |  |  |
|     | Security deposits and p  |   | made as that you may continue continue continue as from a commany  |  |
|     | Examples: Agreements v   |   | re made so that you may continue service or use from a company epaid rent, public utilities (electric, gas, water), telecommunications   |  |
|     | companies, or others   |   |  | :  |
|     | ☑ No   |   |  |  |
|     | ☐ Yes  |   | Institution name or individual:  | :  |
|     |  | Electric:                               |  | \$ :   |
|     |  | Gas:                                    |  | \$   |
|     |  | Heating oil:                            | ·  | \$   |
|     |  | Rental unit:                            |  | \$   |
|     |  | Prepaid rent:                           |  | \$   |
|     |  | Telephone:                              |  | \$   |
|     |  | Water:<br>Rented furniture:             |  | \$   |
|     |  |   |  | \$   |
|     |  | Other:                                  |  | \$   |
| 22  | Annuition (A nontropt for  | a poriodio porme                        | and of manay to you, either for life or for a number of years)   | ı  |
|     |  | a penouic payme                         | ent of money to you, either for life or for a number of years)   |  |
|     | ☑ No ☐ Yes   | Issuer name and                         | description  | :  |
|     | Land 100   | issuel Hallie affü                      | ocoorpriors  | \$   |
|     |  |   |  | \$   |
|     |  |   |  | \$   |
|     | to a construction appears to the government of the construction of the |   | Control of the Contro | ere e seu en la calación de la colora de la colora de la calación de la colora de la colora de la colora de la |

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|  |  | tion program  |   |
|--|--|---|---|
| and the second s | ωψ(Δ)(1).  | non program.  |   |
| IX I NO  |  |   |   |
| <b>— 1.</b> ,  |  |   |   |
| LJ YesInstitution  | on name and description. Separately file the records of any interests.1  | 1 U.S.C. § 521(c):  |   |
|  |  |   |   |
|  |  |   | \$  |
|  |  |   | \$  |
|  |  |   | \$  |
|  |  |   | · :   |
|  |  |   |   |
|  | n property (other than anything listed in line 1), and rights or pow   | ers   |   |
|  |  |   |   |
|  |  |   |   |
|  |  |   | \$ 0.00   |
| information about them   |  |   | \$ 0.00   |
|  |  |   |   |
|  |  |   |   |
| •  | isites, proceeds from royalties and licensing agreements   |   |   |
| ☑ No   |  |   |   |
| Yes. Give specific   |  |   |   |
| information about them   |  |   | \$ <u>0.00</u>  |
| Yes   Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):   Separately file the records of any interests.11 U.S.C. § 521(c):   Separately file the records of any interests.11 U.S.C. § 521(c):   Separately file the records of any interests.11 U.S.C. § 521(c):   Separately file the records of any interests.11 U.S.C. § 521(c):   Separately file the records of any interests.11 U.S.C. § 521(c):   Separately file the records of any interests.11 U.S.C. § 521(c):   Separately file the records of any interests.11 U.S.C. § 521(c):   Separately file the records of any interests.11 U.S.C. § 521(c):   Separately file the records of any interests.11 U.S.C. § 521(c):   Separately file the records of any interests.11 U.S.C. § 521(c):   Separately file the records of any interests.11 U.S.C. § 521(c):   Separately file the records of any interests.11 U.S.C. § 521(c):   Separately file the records of any interests.11 U.S.C. § 521(c):   Separately file the records of any interests.11 U.S.C. § 521(c):   Separately file the records of any interests.11 U.S.C. § 521(c):   Separately file the records of any interests.11 U.S.C. § 521(c):   Separately file the records of any interests.11 U.S.C. § 521(c):   Separately file the records of any interests.11 U.S.C. § 521(c):   Separately file the records of any interests.11 U.S.C. § 521(c):   Separately file the records of any interests.11 U.S.C. § 521(c):   Separately file the records of any interests.11 U.S.C. § 521(c):   Separately file the records of any interests.11 U.S.C. § 521(c):   Separately file the records of any interests.11 U.S.C. § 521(c):   Separately file the records of any interests.11 U.S.C. § 521(c):   Separately file the records of any interests.11 U.S.C. § 521(c):   Separately file the records of any interests.11 U.S.C. § 521(c):   Separately file the records of any interests.11 U.S.C. § 521(c):   Separately file the records of any interests.11 U.S.C. § 521(c):   Separately file the records of any interests.11 U.S.C. § 521(   | •  |   |   |
| 27 Licenses, franchises, and other gene  | ral intangibles  |   |   |
| =  | <del>-</del>   | licenses  |   |
| etanlistramini |  |   |   |
|  |  |   |   |
|  |  |   | \$ 0.00   |
| information about them   |  |   | \$_0.00   |
| Participation of the Control of the  | Ga sananna Gaels gailt ar thanan can a dheach a a can cheall sa ch   | se elivis terki savas   | Le que estado a contra a transferio   |
| Money or property owed to you?   | 일일 일 사용 중요 전 전 전 전 등 등 보고 있는 것 같은 것 같은 것 같은 것 같은 것 같은 것 같다.  |   |   |
|  |  |   | Current value of the  |
|  |  |   | portion you own?  |
|  |  |   | portion you own? Do not deduct secured  |
|  |  |   | portion you own?  |
| 28. Tax refunds owed to you  |  |   | portion you own? Do not deduct secured  |
| 28. Tax refunds owed to you  |  |   | portion you own? Do not deduct secured  |
| 28. Tax refunds owed to you  ☑ No  | Fede   |   | portion you own? Do not deduct secured claims or exemptions.  |
| 28. Tax refunds owed to you  ✓ No  — Yes. Give specific information about them, including whether  |  | ral: \$ <u>(</u>  | portion you own? Do not deduct secured claims or exemptions.  |
| 28. Tax refunds owed to you  V No  Yes. Give specific information about them, including whether you already filed the returns  | State  | ral: \$ <u></u><br>: \$ <u></u>   | portion you own? Do not deduct secured claims or exemptions.  0.00  |
| 28. Tax refunds owed to you  V No  Yes. Give specific information about them, including whether you already filed the returns  | State  | ral: \$ <u>{</u>  | portion you own? Do not deduct secured claims or exemptions.  |
| 28. Tax refunds owed to you  V No  Yes. Give specific information about them, including whether you already filed the returns  | State  | ral: \$ <u>{</u>  | portion you own? Do not deduct secured claims or exemptions.  0.00  |
| 28. Tax refunds owed to you  No Yes. Give specific information about them, including whether you already filed the returns and the tax years   | State  | ral: \$ <u>{</u>  | portion you own? Do not deduct secured claims or exemptions.  0.00  |
| 28. Tax refunds owed to you  ☑ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years.  29. Family support  | State Local  | ral: \$ <u>(</u> : \$ <u>(</u> : \$ <u>(</u>  | portion you own? Do not deduct secured claims or exemptions.  0.00  |
| 28. Tax refunds owed to you  You  Yes. Give specific information about them, including whether you already filed the returns and the tax years   | State Local ny, spousal support, child support, maintenance, divorce settlement, pr  | ral: \$ <u>(</u> : \$ <u>(</u> : \$ <u>(</u>  | portion you own? Do not deduct secured claims or exemptions.  0.00  |
| 28. Tax refunds owed to you  ✓ No  — Yes. Give specific information about them, including whether you already filed the returns and the tax years  | State Local ny, spousal support, child support, maintenance, divorce settlement, pr  | ral: \$ <u>(</u> : \$ <u>(</u> : \$ <u>(</u>  | portion you own? Do not deduct secured claims or exemptions.  0.00  |
| 28. Tax refunds owed to you  ✓ No  — Yes. Give specific information about them, including whether you already filed the returns and the tax years  | State Local  ny, spousal support, child support, maintenance, divorce settlement, pr  Owed Alimony but unemployed                      | ral: \$_{} : \$_{} : \$_{}  operty settlement   | Do not deduct secured claims or exemptions.  0.00 0.00 0.00   |
| 28. Tax refunds owed to you  ✓ No  — Yes. Give specific information about them, including whether you already filed the returns and the tax years  | ny, spousal support, child support, maintenance, divorce settlement, pr  | ral: \$_{}\$_{}\$_{}\$_{}\$_{}\$  | portion you own? Do not deduct secured claims or exemptions.  0.00 0.00 0.00 0.00   |
| 28. Tax refunds owed to you  ✓ No  — Yes. Give specific information about them, including whether you already filed the returns and the tax years  | ny, spousal support, child support, maintenance, divorce settlement, pr  | ral: \$_{\frac{1}{2}}\$ : \$_{\frac{1}{2}}\$ : \$_{\frac{1}{2}}\$  coperty settlement  by: contact:                       | portion you own? Do not deduct secured claims or exemptions.  0.00  0.00  0.00  \$\frac{0.00}{0.00}\$   |
| 28. Tax refunds owed to you  ✓ No  — Yes. Give specific information about them, including whether you already filed the returns and the tax years  | ny, spousal support, child support, maintenance, divorce settlement, pr  Owed Alimony but unemployed  Alimon Mainte                    | ral: \$\frac{4}{5}\$ : \$\frac{4}{5}\$ : \$\frac{4}{5}\$ : soperfy settlement  by: :::::::::::::::::::::::::::::::::      | portion you own? Do not deduct secured claims or exemptions.  0.00 0.00 0.00 0.00 \$\frac{0.00}{\\$0.00}\$ \$\frac{0.00}{\\$17,000.00}\$  |
| 28. Tax refunds owed to you  ✓ No  — Yes. Give specific information about them, including whether you already filed the returns and the tax years  | State Local  ny, spousal support, child support, maintenance, divorce settlement, pr  Owed Alimony but unemployed  Alimon Mainte Suppo | ral: \$\frac{4}{5}\$ : \$\frac{4}{5}\$ : \$\frac{4}{5}\$ : soperfy settlement  by: :::::::::::::::::::::::::::::::::      | portion you own? Do not deduct secured claims or exemptions.  0.00  0.00  0.00  \$\frac{0.00}{0.00}\$   |
| 28. Tax refunds owed to you  ✓ No  — Yes. Give specific information about them, including whether you already filed the returns and the tax years  | Owed Alimony but unemployed  Alimony Mainte Suppo Divorce  | ral: \$ (s) : \$ (s) : \$ (s) : soperty settlement  ry: : nance: rt: e settlement:  | portion you own? Do not deduct secured claims or exemptions.  0.00 0.00 0.00 0.00 \$\frac{0.00}{\\$0.00}\$ \$\frac{0.00}{\\$17,000.00}\$  |
| 28. Tax refunds owed to you  ✓ No  — Yes. Give specific information about them, including whether you already filed the returns and the tax years  | Owed Alimony but unemployed  Alimony Mainte Suppo Divorce  | ral: \$ (s) : \$ (s) : \$ (s) : soperty settlement  ry: : nance: rt: e settlement:  | portion you own? Do not deduct secured claims or exemptions.  0.00 0.00 0.00 0.00  \$\frac{0.00}{5.0.00}\$ \$\frac{17,000.00}{5.0.00}\$   |
| 28. Tax refunds owed to you  ☑ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years.  29. Family support  Examples: Past due or lump sum alimon ☐ No ☑ Yes. Give specific information   | Owed Alimony but unemployed  Alimon Mainte Suppo Divorce Proper  | ral: \$_{\text{:}} : \$_{\text{:}} : \$_{\text{:}} : operty settlement  by: : nance: rt: : e settlement: : ty settlement: | portion you own? Do not deduct secured claims or exemptions.  0.00 0.00 0.00 0.00  \$\frac{0.00}{5.0.00}\$ \$\frac{17,000.00}{5.0.00}\$   |
| 28. Tax refunds owed to you  ☑ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years   | Owed Alimony but unemployed  Alimon Mainte Suppo Divorce Proper  | ral: \$_{\text{:}} : \$_{\text{:}} : \$_{\text{:}} : operty settlement  by: : nance: rt: : e settlement: : ty settlement: | portion you own? Do not deduct secured claims or exemptions.  0.00 0.00 0.00 0.00  \$\frac{0.00}{5.0.00}\$ \$\frac{17,000.00}{5.0.00}\$   |
| 28. Tax refunds owed to you  ☑ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years   | Owed Alimony but unemployed  Alimon Mainte Suppo Divorce Proper  | ral: \$_{\text{:}} : \$_{\text{:}} : \$_{\text{:}} : operty settlement  by: : nance: rt: : e settlement: : ty settlement: | portion you own? Do not deduct secured claims or exemptions.  0.00 0.00 0.00 0.00  \$\frac{0.00}{5.0.00}\$ \$\frac{17,000.00}{5.0.00}\$   |
| 28. Tax refunds owed to you  ☑ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years   | Owed Alimony but unemployed  Alimony Mainte Suppo Divorce Proper  aid loans you made to someone else                                   | ral: \$_{\text{:}} : \$_{\text{:}} : \$_{\text{:}} : operty settlement  by: : nance: rt: : e settlement: : ty settlement: | portion you own? Do not deduct secured claims or exemptions.  0.00 0.00 0.00 0.00  \$\frac{0.00}{5.0.00}\$ \$\frac{17,000.00}{5.0.00}\$   |
| 28. Tax refunds owed to you  ☑ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years   | Owed Alimony but unemployed  Alimony Mainte Suppo Divorce Proper  aid loans you made to someone else                                   | ral: \$\frac{1}{2}\$  : \$\frac{1}{2}\$  coperty settlement  ry: enance: rt: e settlement: ty settlement: compensation,   | \$\frac{0.00}{0.00}\$ |
| 28. Tax refunds owed to you  ☑ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years   | Owed Alimony but unemployed  Alimony Mainte Suppo Divorce Proper  aid loans you made to someone else                                   | ral: \$\frac{1}{2}\$  : \$\frac{1}{2}\$  coperty settlement  ry: enance: rt: e settlement: ty settlement: compensation,   | portion you own? Do not deduct secured claims or exemptions.  0.00 0.00 0.00 0.00  \$\frac{0.00}{5.0.00}\$ \$\frac{17,000.00}{5.0.00}\$   |

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| 31. Interests in insurance policies  Examples: Health, disability, or life insurance.  No  | nce; health savings account (HS/                            | A); credit, homeowner's, or renter's insurance  |  |
|--|---|---|--|
| Yes. Name the insurance company of each policy and list its value  | Company name:   | Beneficiary:  | Surrender or refund value:   |
| or each policy and list its value  | •   |   | \$   |
|  |   |   | \$   |
|  |   |   | \$   |
| 32. Any Interest in property that is due you if you are the beneficiary of a living trust, a property because someone has died.  No Yes. Give specific information |   | ance policy, or are currently entitled to receive   | \$0.00   |
| 33. Claims against third parties, whether o  Examples: Accidents, employment dispute  I No   |   | · ·   |  |
| Yes. Describe each claim   |   |   | \$ <u>0.00</u>   |
| 34. Other contingent and unliquidated clair to set off claims  | ns of every nature, including c                             | ounterclaims of the debtor and rights   | · ·  |
| ☑ No ☐ Yes. Describe each claim  |   |   | ş <u>0.00</u>  |
| 35. Any financial assets you did not alread  | / list  |   |  |
| No Yes. Give specific information  |   |   | ş <u>0.00</u>  |
| 36. Add the dollar value of all of your entried for Part 4. Write that number here   |   | ntries for pages you have attached  | \$ 17,000.00   |
| en de Marantenane en en este se este este este este en este en en en en en este en este este   | en en en et al lette en | and the second section of the second section is a second section of the second section is a second section of | 10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1   |
| Part 5: Describe Any Business-   | Related Property You O                                      | wn or Have an Interest In. List any   | real estate in Part 1.   |
| 37. Do you own or have any legal or equital No. Go to Part 6. Yes. Go to line 38.  | ole interest in any business-rel                            | lated property?   | ent (Alabaman) en                              |
|  |   |   | Current value of the portion you own?  Do not deduct secured claims or exemptions. |
| 38. Accounts receivable or commissions yo  | ou already earned   |   |  |
| Yes. Describe  |   |   | \$   |
| 39. Office equipment, furnishings, and sup Examples: Business-related computers, software No   |   | hines, rugs, telephones, desks, chairs, electronic device   | :<br>:   |
| Yes. Describe  |   |   | \$   |
|  |   |   | <u>.</u>   |

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| 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade    No   |
|---|
| Yes. Describe   41. Inventory   |
| 41. Inventory  No Yes. Describe  42. Interests in partnerships or joint ventures  No Yes. Describe  Name of entity:  "% \$ "% \$ "% \$ "% \$ "% \$ "% \$ "% \$ "%                   |
| No Yes. Describe  42. Interests in partnerships or joint ventures  No Yes. Describe  Name of entity:  """ """ "" "" "" "" "" "" "" "" "" ""   |
| No Yes. Describe \$   |
| Yes. Describe  42. Interests in partnerships or joint ventures  No Yes. Describe Name of entity:  |
| 42. Interests in partnerships or joint ventures  No Yes. Describe Name of entity:   |
| No Yes. Describe Name of entity: % of ownership:  |
| No Yes. Describe Name of entity: % of ownership:  |
| Yes. Describe Name of entity:   |
| 43. Customer lists, mailing lists, or other compilations  No  Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?  Yes. Describe   |
| 43. Customer lists, mailing lists, or other compilations  No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?  No Yes. Describe |
| 43. Customer lists, mailing lists, or other compilations  No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?  No Yes. Describe |
| 43. Customer lists, mailing lists, or other compilations  No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?  No Yes. Describe |
| <ul> <li>No</li> <li>Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?</li> <li>No</li> <li>Yes. Describe</li> </ul>             |
| ☐ Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))? ☐ No ☐ Yes. Describe   |
| ☐ No ☐ Yes. Describe  |
| Yes. Describe   |
| — rea: Bedeinbertann  |
| \$  |
|   |
| 44. Any business-related property you did not already list  |
| Yes. Give specific  |
| information   |
| <u> </u>  |
| <u> </u>  |
| \$  |
| <u> </u>  |
| <u> </u>  |
| 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached \$ 0.00  |
| for Part 5. Write that number here  |
|   |
|   |
| Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.  |
| If you own or have an interest in farmland, list it in Part 1.  |
| 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?   |
| No. Go to Part 7.   |
| Yes. Go to line 47.   |
| Current value of the  |
| portion you own?  Do not deduct secured claims  |
| or exemptions.  |
| 47. Farm animals  |
| Examples: Livestock, poultry, farm-raised fish  |
| ☐ No ☐ Yes  |
|   |
| \$  |

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| 48. Crops—either growing or harvested   |  |   |  |
|---|--|---|--|
| ☐ No ☐ Yes. Give specific information   |  |   | \$                                     |
| 49. Farm and fishing equipment, implements, machinery, fixture  No Yes  | s, and tools of trade  |   | :<br>:<br>:                            |
| Tes   | TO THE WORK OF THE PROPERTY OF | MANAMATAN MINISTER IN STATE OF THE STATE OF | \$                                     |
| 50. Farm and fishing supplies, chemicals, and feed  |  |   |  |
| Yes   | **************************************   |   | \$                                     |
| 51. Any farm- and commercial fishing-related property you did n   | ot already list  |   |  |
| Yes. Give specific information  | llin II S Mit of the filled demonstrate of a stack or flaction may be a mile than having miles have been been  |   | <b>\$</b>                              |
| 52. Add the dollar value of all of your entries from Part 6, includi  |  | _   | \$0.00                                 |
|   |  |   |  |
| Part 7: Describe All Property You Own or Have   | an Interest in Tha   | t You Did Not List Above  |  |
| 53. Do you have other property of any kind you did not already leading to be seen tickets, country club membership  No Yes. Give specific | ist?   |   |  |
| information   | And And Hardward and And Hardward Americans and Administration of Andrews Andrews and Andrews Andrews Andrews  |   |  |
| 54. Add the dollar value of all of your entries from Part 7. Write the  | hat number here  | <b>→</b>  | \$ <u>0.00</u>                         |
| Part 8: List the Totals of Each Part of this Form   |  |   |  |
| 55. Part 1: Total real estate, line 2   | •••••••••••••••••••••••••••••••••••••••  | ······  | \$ <u>0.00</u>                         |
| 56. Part 2: Total vehicles, line 5  | \$_250.00  |   |  |
| 57 Part 3: Total personal and household items, line 15  | <b>3</b>   | · · · · · · · · · · · · · · · · · · ·   |  |
| 58. Part 4: Total financial assets, line 36   | \$_17,000.00   | _   |  |
| 59. Part 5: Total business-related property, line 45  | \$_0.00  | TANKS   | · ************************************ |
| 60. Part 6: Total farm- and fishing-related property, line 52   | \$ <u>0.00</u>   |   |  |
| 61. Part 7: Total other property not listed, line 54  | +\$0.00  | <del>_</del>  | Frank Samuel et                        |
| 62. Total personal property. Add lines 56 through 61  | \$_18,800.00   | Copy personal property total →  | +\$18,800.00                           |
| 63. Total of all property on Schedule A/B. Add line 55 + line 62  |  |   | \$_18,800.00                           |

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| Fill in this in     | formation to ide                         | entify your case:                      |           |
|---------------------|--|--|-----------|
| Debtor 1            | Ami M Cutrone                            |  |           |
|                     | First Name                               | Middle Name                            | Last Name |
| Debtor 2            | MT-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1 | ······································ |           |
| (Spouse, if filing) | First Name                               | Middle Name                            | Last Name |
| United States I     | Bankruptcy Court fo                      | or the: Northern District of Illinois  |           |
| Case number         |  |  | ,,        |
| (If known)          |  | ************************************** |           |

#### Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| would be limited to the applicable statutory amount. |   |  |  |
|--|---|--|--|
| Pa   | rt 1: Identify the Property You Claim as Exempt   |  |  |
|  | Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.  ☑ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) |  |  |

| You are claiming state and federal nonban  You are claiming federal exemptions. 11 to   |                                      | S.C. § 522(b)(3)   |  |
|---|--------------------------------------|--|--|
| 2. For any property you list on Schedule A/B to   | hat you claim as exempt,             | fill in the information below.   |  |
| Brief description of the property and line on<br>Schedule A/B that lists this property  | Current value of the portion you own | Amount of the exemption you claim  | Specific laws that allow exemption               |
|   | Copy the value from<br>Schedule A/B  | Check only one box for each exemption  |  |
| 2003 Dodge Durang<br>Brief<br>description:  | \$ <u>250.00</u>                     | ☑ \$ 250.00<br>☐ 100% of fair market value, up to                                  | 735 lil. Comp. Stat. 5/12-1001 (c) -<br>\$250.00 |
| Line from  Schedule A/B: 3.1  Household goods - Beds, Used Couches, L Brief and Tables description:   | amps,<br>\$_600.00                   | any applicable statutory limit   | 735 III. Comp. Stat. 5/12-1001 (b) -<br>\$600.00 |
| Line from Schedule A/B: 6   |                                      | 100% of fair market value, up to any applicable statutory limit                    |  |
| Brief Electronics - Used TV, cellphone, xbox description:  Line from Schedule A/B: 7  | \$ <u>200.00</u>                     | \$ 200.00 Index to 100% of fair market value, up to any applicable statutory limit | 735 III. Comp. Stat. 5/12-1001 (b) -<br>\$200.00 |
| 3. Are you claiming a homestead exemption o (Subject to adjustment on 4/01/19 and every 3  ☑ No ☐ Yes. Did you acquire the property covered | years after that for cases fi        |  |  |
| ☐ No<br>☐ Yes   |                                      |  |  |

Debtor 1

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| ari Pa Addi | ti | tic | tio | tio | tio | tio |
|-------------|----|-----|-----|-----|-----|-----|
|-------------|----|-----|-----|-----|-----|-----|

| Part 2:                           | Additional Page  |   |  |  |
|-----------------------------------|--|---|--|--|
|                                   | description of the property and line<br>chedule A/B that lists this property | Current value of the portion you own  | exemption you claim  | Specific laws that allow exemption                     |
|                                   |  | Copy the value from<br>Schedule A/B   | Check only one box for each exemption                              |  |
| Brief<br>description              | Clothing - Adult and kids clothing, family pictures                          | \$ <u>600.00</u>  | \$ 600.00  | 735 III. Comp. Stat. 5/12-1001 (a) -<br>\$600.00       |
| Line from<br>Schedule A           |  |   | 100% of fair market value, up to any applicable statutory limit    |  |
| Brief<br>description              | Jewelry - Costume Jewelry  | \$ <u>150.00</u>  | <b>⊘</b> \$ 150.00   | 735 III. Comp. Stat. 5/12-1001 (b) -<br>\$150.00       |
| Line from<br>Schedule A           | VB; 12   |   | 100% of fair market value, up to<br>any applicable statutory limit |  |
| Brief<br>description              | Owed Alimony but unemployed (owed to debtor)                                 | \$ <u>17,000.00</u>   | \$ 17,000.00   | 735 III. Comp. Stat. 5/12-1001 (g)(4) -<br>\$17,000.00 |
| Line from<br>Schedule A           | <i>VB:</i> 29  |   | 100% of fair market value, up to any applicable statutory limit    |  |
| Brief<br>description              | :  | \$  | <u></u> s  |  |
| Line from<br>Schedule A           | VB:  |   | 100% of fair market value, up to any applicable statutory limit    |  |
| Brief<br>description              | :  | \$  | \$100% of fair market value, up to                                 |  |
| Line from<br>Schedule A           | VB:  |   | any applicable statutory limit                                     |  |
| Brief<br>description<br>Line from |  | \$  | \$100% of fair market value, up to any applicable statutory limit  |  |
| Schedule A                        | VB;  |   | p <sub>t. Sh</sub> unjemu (xxxxx)                                  |  |
| Brief<br>description              | :  | \$  | \$ \$ 100% of fair market value, up to                             |  |
| Line from<br>Schedule A<br>Brief  | VB:  |   | any applicable statutory limit                                     |  |
| description                       | :  | \$  | \$ 100% of fair market value, up to any applicable statutory limit |  |
| Line from Schedule A              | VB:  | e de la companya de | any approase statutory min   |  |
| Brief<br>description              |  | \$  | \$ 100% of fair market value, up to                                |  |
| Line from Schedule A              | <b>VB:</b>   | en grang grang aras na say na sa masa a amin'ny managana ara-   | any applicable statutory limit                                     |  |
| Brief<br>description<br>Line from | :  | \$  | \$ 100% of fair market value, up to                                |  |
| Schedule &                        | VB:  |   | any applicable statutory limit                                     |  |
| description                       | :  | \$  | \$ 100% of fair market value, up to any applicable statutory limit |  |
| Line from Schedule A              | VB:  |   |  |  |
| Brief<br>description<br>Line from | :  | \$  | \$100% of fair market value, up to any applicable statutory limit  |  |
| Schedule A                        | VB:  |   |  |  |

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| Fill in this information to identify your cas      | e:  |                                   |  |                            |
|--|---|-----------------------------------|--|----------------------------|
| Ami M Cutrone<br>Debtor 1                          |   |                                   |  |                            |
| First Name Middle N                                | ame Last Name   |                                   |  |                            |
| Debtor 2 (Spouse, if filing) First Name Middle N   | ame Last Name   |                                   |  |                            |
| United States Bankruptcy Court for the: Northern D | istrict of Illinois   |                                   |  |                            |
| Case number  |   |                                   |  |                            |
| (If known)   |   |                                   |  | if this is an<br>ed filing |
|  |   |                                   | amend                                  | ed ming                    |
| Official Form 106D                                 |   |                                   |  |                            |
| Schedule D: Creditors                              | s Who Have Claims Secur   | ed by Pro                         | perty                                  | 12/15                      |
|  | If two married people are filing together, both are ed<br>the Additional Page, fill it out, number the entries,     |                                   |  |                            |
| additional pages, write your name and cas          |   |                                   | ·                                      | •                          |
| 1. Do any creditors have claims secured b          | y your property?  |                                   |  |                            |
| _  | n to the court with your other schedules. You have noth   | ng else to report on              | this form.                             |                            |
| Yes. Fill in all of the information below.         |   |                                   |  |                            |
| Part 1: List All Secured Claims                    |   |                                   |  |                            |
|  |   | Column A                          | Column B                               | Column C                   |
|  | ore than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2. | Amount of claim Do not deduct the | Value of collateral that supports this | Unsecured portion          |
| As much as possible, list the claims in alph       | abetical order according to the creditor's name.  | value of collateral.              | claim                                  | If any                     |
| 2.1  | Describe the property that secures the claim:   | \$                                | \$                                     | \$                         |
| Creditor's Name                                    |   |                                   |  |                            |
| Number Street                                      |   |                                   |  |                            |
|  |   |                                   |  |                            |
|  | As of the date you file, the claim is: Check all that apply.  |                                   |  |                            |
| City State ZIP Code                                | Contingent  |                                   |  |                            |
| Who owes the debt? Check one.                      | Unliquidated Disputed   |                                   |  |                            |
| Debtor 1 only                                      | ,   |                                   |  |                            |
| Debtor 2 only                                      | Nature of lien. Check all that apply.   |                                   |  |                            |
| Debtor 1 and Debtor 2 only                         | <ul> <li>An agreement you made (such as mortgage or secured<br/>car loan)</li> </ul>                                |                                   |  |                            |
| At least one of the debtors and another            | Statutory lien (such as tax lien, mechanic's lien)  |                                   |  |                            |
| Check if this claim relates to a community debt    | Usual Judgment lien from a lawsuit Uther (including a right to offset)  |                                   |  |                            |
| Date debt was incurred                             | Last 4 digits of account number   | -                                 |  |                            |
| 2.2  | Describe the property that secures the claim:   | \$                                | \$                                     | \$                         |
| Creditor's Name                                    |   |                                   |  |                            |
| Number Street                                      |   |                                   |  |                            |
|  |   | and Announce                      |  |                            |
|  | As of the date you file, the claim is: Check all that apply.  |                                   |  |                            |
| City State ZIP Code                                | ☐ Contingent  |                                   |  |                            |
| Who owes the debt? Check one.                      | Unliquidated  |                                   |  |                            |
| Debtor 1 only                                      | Disputed  |                                   |  |                            |
| Debtor 2 only                                      | Nature of lien. Check all that apply.   |                                   |  |                            |
| Debtor 1 and Debtor 2 only                         | An agreement you made (such as mortgage or secured car loan)  |                                   |  |                            |
| At least one of the debtors and another            | Statutory lien (such as tax lien, mechanic's lien)  |                                   |  |                            |
| Check if this claim relates to a                   | Judgment lien from a lawsuit  |                                   |  |                            |
| community debt  Date debt was incurred             | Other (including a right to offset)  Last 4 digits of account number  | -                                 |  |                            |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$ 0.00

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Debtor 1

Ami M Cutrone

Part 2: List Others to Be Notified for a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page. On which line in Part 1 did you enter the creditor? Name Last 4 digits of account number Street City State ZIP Code On which line in Part 1 did you enter the creditor? \_\_ Last 4 digits of account number Name Street City State ZIP Code On which line in Part 1 did you enter the creditor? \_\_\_ Name Last 4 digits of account number Street City State ZIP Code On which line in Part 1 did you enter the creditor? \_ Last 4 digits of account number Name Street City State ZIP Code On which line in Part 1 did you enter the creditor? \_\_\_\_\_ Name Last 4 digits of account number Street City ZIP Code State On which line in Part 1 did you enter the creditor? \_\_\_\_ Last 4 digits of account number Name Street

ZIP Code

State

City

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Yes

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|    | 7 | ÷ | 2. |

| 1                  | Do any creditors have nonpriority unsec<br>No. You have nothing to report in this pay<br>Yes |  |   |  |
|--------------------|--|--|---|--|
|                    | nonpriority unsecured claim, list the creditor   | separately for each claim<br>holds a particular claim, li  | rder of the creditor who holds each claim. If a creditor has For each claim listed, identify what type of claim it is. Do not st the other creditors in Part 3.If you have more than three no | list claims already  |
|                    |  |  |   | Total claim  |
| 4,1                | Nonpriority Creditor's Name  |  | Last 4 digits of account number 4397  | s 503.00   |
|                    | PO BOX 6250  |  | When was the debt incurred?   | \$   |
|                    | Number Street  |  |   |  |
|                    | Madison W  |  | As of the date you file, the claim is: Check all that apply.  |  |
|                    | City Stat  | e ZIP Code   | Contingent  |  |
|                    | Who incurred the debt? Check one.  Debtor 1 only   |  | ☐ Unliquidated ☐ Disputed   |  |
|                    | Debtor 2 only  |  |   |  |
|                    | Debtor 1 and Debtor 2 only   |  | Type of NONPRIORITY unsecured claim:  |  |
|                    | At least one of the debtors and another  |  | Student loans   |  |
|                    | $\square$ Check if this claim is for a community   | debt   | <ul> <li>Obligations arising out of a separation agreement or divorce<br/>that you did not report as priority claims</li> </ul>   |  |
|                    | Is the claim subject to offset?  |  | Debts to pension or profit-sharing plans, and other similar debts   |  |
|                    | ☑ No   |  | Other. Specify Medical Services   |  |
|                    | Yes  | y the state of the |   | hallen konstruktion kallen |
| 4.2                | Bank of America  |  | Last 4 digits of account number   | ş Unknown  |
|                    | Nonpriority Creditor's Name 100 N. Tryon St  |  | When was the debt incurred?   |  |
|                    | Number Street  |  |   |  |
|                    |  |  | As of the date you file, the claim is: Check all that apply.  |  |
|                    | Charlotte NC   |  | Contingent  |  |
|                    | City Stat Who incurred the debt? Check one.  | e ZIP Code   | Unliquidated  |  |
|                    | Debtor 1 only  |  | ☐ Disputed  |  |
|                    | Debtor 2 only Debtor 1 and Debtor 2 only   |  | Type of NONPRIORITY unsecured claim:  |  |
|                    | At least one of the debtors and another  |  | ☐ Student loans   |  |
|                    | ☐ Check if this claim is for a community   | deht   | Obligations arising out of a separation agreement or divorce that you did not report as priority claims   |  |
|                    | Is the claim subject to offset?  |  | Debts to pension or profit-sharing plans, and other similar debts   |  |
|                    | ✓ No   |  | Other. Specify Overdrawn Bank Account   |  |
|                    | Yes  |  |   |  |
| 4.3                | CMI<br>Nonpriority Creditor's Name   |  | Last 4 digits of account number   | \$840.00   |
| \$7,745,745,745,74 | 4200 INTERNATIONAL PKWY  | wasaasaasaa waa aa   | When was the debt incurred? 04/19/2012  | 3010.00  |
|                    | Number Street  |  |   |  |
|                    | CARROLITON   | 75007-1912   | As of the date you file, the claim is: Check all that apply.  |  |
|                    | CARROLLTON TX  |  | ☐ Contingent  |  |
|                    | Who incurred the debt? Check one.  |  | Unliquidated  |  |
|                    | Debtor 1 only  |  | Disputed  |  |
|                    | Debtor 2 only Debtor 1 and Debtor 2 only   |  | Type of NONPRIORITY unsecured claim:  |  |
|                    | At least one of the debtors and another  |  | Student loans   |  |
|                    | Check if this claim is for a community   | debt   | Obligations arising out of a separation agreement or divorce  |  |
|                    | Is the claim subject to offset?  |  | that you did not report as priority claims  | grafix a di mandra   |
|                    | ✓ No   |  | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Cable / Satellite Services   | Variable Value   |
|                    | Yes  |  |   | Ayenade  |
|                    |  |  |   |  |

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| Pa             | List All of Your NONPRIORITY U   | nsecured Claims         |  |  |
|----------------|--|-------------------------|--|--|
|                | Do any creditors have nonpriority unsecured  No. You have nothing to report in this part. S  Yes   | • •                     |  |  |
| 1              | nonpriority unsecured claim, list the creditor sep   | parately for each claim | order of the creditor who holds each claim. If a creditor has<br>n. For each claim listed, identify what type of claim it is. Do not<br>ist the other creditors in Part 3.If you have more than three no | list claims already  |
|                | VIET STATE S |                         |  | Total claim  |
| .4             | CMI<br>Nonpriority Creditor's Name   |                         | Last 4 digits of account number  | \$ 1,595.00  |
|                | A200 INTERNATIONAL PKWY Number Street  | <del> </del>            | When was the debt incurred?  |  |
|                | CARROLLTON TX City State   | 75007-1912<br>ZIP Code  | As of the date you file, the claim is: Check all that apply.   |  |
|                | Who incurred the debt? Check one.  Debtor 1 only   | Air Code                | ☐ Contingent☐ Unliquidated☐ Disputed☐  |  |
|                | Debtor 2 only Debtor 1 and Debtor 2 only   |                         | Type of NONPRIORITY unsecured claim:   |  |
|                | At least one of the debtors and another  Check if this claim is for a community debi   | t                       | Student loans Obligations arising out of a separation agreement or divorce   |  |
|                | Is the claim subject to offset?  ✓ No  ☐ Yes   |                         | that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Cable / Satellite Services   |  |
| .5             | Comcast  |                         | Last 4 digits of account number  | § Unknown  |
| اسس            | Nonpriority Creditor's Name 41112 Concept Dr   |                         | When was the debt incurred?  |  |
|                | Number Street  |                         | As of the date you file, the claim is: Check all that apply.   |  |
|                | Plymouth MI City State   | 48170<br>ZIP Code       | ☐ Contingent ☐ Unliquidated  |  |
|                | Who incurred the debt? Check one.  Debtor 1 only   |                         | ☐ Disputed   |  |
|                | Debtor 2 only Debtor 1 and Debtor 2 only   |                         | Type of NONPRIORITY unsecured claim:   |  |
|                | ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt  | •                       | Student loans Obligations arising out of a separation agreement or divorce   |  |
|                | Is the claim subject to offset?  No  Yes   | •                       | that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other, Specify Cable / Satellite Services   |  |
| .6             | Commonwealth Edison Nonpriority Creditor's Name  |                         | Last 4 digits of account number  | <sub>\$</sub> Unknown  |
| era estra sere | 3 Lincoln Center Number Street   |                         | When was the debt incurred?  | \$ <u></u>   |
|                | Attn CIAIMS/BANKRUPTCY DEPT  | <del></del>             | As of the date you file, the claim is: Check all that apply.   |  |
|                | OakBrook IL City State Who incurred the debt? Check one.   | 60181<br>ZiP Code       | ☐ Contingent   | N DO SERVICE S |
|                | Debtor 1 only Debtor 2 only  |                         | ☐ Unliquidated ☐ Disputed  | Control Contro |
|                | Debtor 1 and Debtor 2 only  At least one of the debtors and another  |                         | Type of NONPRIORITY unsecured claim:   |  |
|                | ☐ Check if this claim is for a community debt  | t                       | Student loans Obligations arising out of a separation agreement or divorce   |  |
|                | Is the claim subject to offset?  No  Yes   |                         | that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Utility Services   |  |
|                |  |                         |  |  |

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| [   | Do any creditors have nonpriority unsecured c  No. You have nothing to report in this part. Sub  ✓ Yes   | omit this form to the  |   |                                   |
|-----|--|--|---|-----------------------------------|
| i i | nonpriority unsecured claim, list the creditor separa  | the alphabetical of ately for each claim   | rder of the creditor who holds each claim. If a creditor has . For each claim listed, identify what type of claim it is. Do not st the other creditors in Part 3.If you have more than three no | more than one list claims aiready |
| 1.7 | Illinois Student Commission Assistance   | e  |   | Total claim                       |
| 1., | Nonpriority Creditor's Name  |  | Last 4 digits of account number   | <sub>\$</sub> Unknown             |
|     | bankruptcy dept  |  | When was the debt incurred?   |                                   |
|     | 1755 Lake Cook Road  |  |   |                                   |
|     | Deerfield IL City State  | 60015<br>ZIP Code  | As of the date you file, the claim is: Check all that apply.  |                                   |
|     |  |  | ☐ Contingent ☐ Unliquidated   |                                   |
|     | Who incurred the debt? Check one.  Debtor 1 only   |  | Disputed  |                                   |
|     | Debtor 2 only  |  | mus properties  |                                   |
|     | Debtor 1 and Debtor 2 only   |  | Type of NONPRIORITY unsecured claim:  |                                   |
|     | At least one of the debtors and another  |  | Student loans   |                                   |
|     | <u> </u>   |  | Obligations arising out of a separation agreement or divorce  |                                   |
|     | Check if this claim is for a community debt  |  | that you did not report as priority claims  |                                   |
|     | Is the claim subject to offset?  |  | Debts to pension or profit-sharing plans, and other similar debts   |                                   |
|     | ✓ No   |  | ✓ Other, Specify  |                                   |
|     | Yes  |  |   |                                   |
| 1.8 | Jesse Muff   | CONTRACTOR SECURITION OF CONTRACTOR OF CONTR | Last 4 digits of account number   | \$8,900.00                        |
|     | Nonpriority Creditor's Name  |  | When was the debt incurred?   |                                   |
|     | 2931 Liberty   |  |   |                                   |
|     | Number Street  |  |   |                                   |
|     | Millionality   |  | As of the date you file, the claim is: Check all that apply.  |                                   |
|     | Westmont IL  | 60559  | Contingent  |                                   |
|     | City State Who incurred the debt? Check one.   | ZIP Code   | Unliquidated  |                                   |
|     | Debtor 1 only  |  | ☐ Disputed  |                                   |
|     | Debtor 2 only  |  | Town of MONDBIODITY over 1 and 1 de la late   |                                   |
|     | Debtor 1 and Debtor 2 only   |  | Type of NONPRIORITY unsecured claim:  |                                   |
|     | At least one of the debtors and another  |  | Student loans   |                                   |
|     | ☐ Check if this claim is for a community debt  |  | Obligations arising out of a separation agreement or divorce that you did not report as priority claims   |                                   |
|     | Is the claim subject to offset?  |  | Debts to pension or profit-sharing plans, and other similar debts   |                                   |
|     | ✓ No   |  | Other. Specify personal loan  |                                   |
|     | Yes  |  |   |                                   |
| 1.9 | MCCARTHY BURGESS AND WOL   |  | Last 4 digits of account number   | -1 EDP 00                         |
|     | Nonpriority Creditor's Name  | To the the same years to be a series of the con-   | When was the debt incurred?   | \$1,598.00                        |
|     | 26000 CANNON ROAD Number Street  |  |   |                                   |
|     |  |  |   |                                   |
|     | D = 35 = -1  | 44146  | As of the date you file, the claim is: Check all that apply.  |                                   |
|     | Bedford OH   |  | p-w   |                                   |
|     | City State   | ZIP Code   | Contingent  |                                   |
|     | City State Who incurred the debt? Check one.   | ZIP Code   | ☐ Contingent ☐ Unliquidated   |                                   |
|     | City State Who incurred the debt? Check one.  Debtor 1 only  | ZIP Code   |   |                                   |
|     | City State  Who incurred the debt? Check one.  ✓ Debtor 1 only  Debtor 2 only  | ZIP Code   | Unliquidated Disputed   |                                   |
|     | City State  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only  | ZIP Code   | Unliquidated  |                                   |
|     | City State Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another   | ZIP Code   | ☐ Unliquidated ☐ Disputed  Type of NONPRIORITY unsecured claim: ☐ Student loans   |                                   |
|     | City State  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only  | ZIP Code   | ☐ Unliquidated ☐ Disputed  Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce  |                                   |
|     | City Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? | ZIP Code   | ☐ Unliquidated ☐ Disputed  Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims       |                                   |
|     | City State  Who incurred the debt? Check one.  ✓ Debtor 1 only  Debtor 2 only  Debtor 1 and Debtor 2 only  At least one of the debtors and another  Check if this claim is for a community debt                    | ZIP Code   | ☐ Unliquidated ☐ Disputed  Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims       |                                   |

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|      | Do any creditors have nonpriority unsecured  No. You have nothing to report in this part. S  Yes |   |  |  |
|------|--|---|--|--|
|      | nonpriority unsecured claim, list the creditor sepa  | rately for each claim                   | order of the creditor who holds each claim. If a creditor has<br>i. For each claim listed, identify what type of claim it is. Do not<br>ist the other creditors in Part 3.If you have more than three no | list claims already  |
|      |  |   |  | Total claim  |
| 1.10 | MEDICAL BUSINESS BUREAU Nonpriority Creditor's Name  |   | Last 4 digits of account number  | 4.050.00   |
|      | PO BOX 1219  |   | When was the debt incurred?  | \$ 1,650.00  |
|      | Number Street  |   | when was the dept incurred?  | 200  |
|      | PARK RIDGE, IL City State  | 60068-7219<br>ZIP Code                  | As of the date you file, the claim is: Check all that apply.   |  |
|      |  | ZIF Code                                | Contingent   | accurately p   |
|      | Who incurred the debt? Check one.  Debtor 1 only   |   | ☐ Unliquidated ☐ Disputed  | Paralle Control of Victoria  |
|      | Debtor 2 only Debtor 1 and Debtor 2 only   |   | Type of NONPRIORITY unsecured claim:   | and and an and an  |
|      | At least one of the debtors and another  |   | Student loans  | ***************************************  |
|      | ☐ Check if this claim is for a community debt  |   | Obligations arising out of a separation agreement or divorce that you did not report as priority claims  | ova.n.novelop-pop-   |
|      | Is the claim subject to offset?  |   | Debts to pension or profit-sharing plans, and other similar debts  | Configuration and the second s |
|      | ✓ No<br>☐ Yes  |   | Other, Specify Medical Services  | nder den une en men  |
| 1.11 | MEDICAL BUSINESS BUREAU  |   | Last 4 digits of account number  | \$ 594.00  |
| لسبب | Nonpriority Creditor's Name PO BOX 1219  |   | When was the debt incurred?  | Non-matrix promotes  |
|      | Number Street  |   |  | noch vermon oc   |
|      |  | *************************************** | As of the date you file, the claim is: Check all that apply.   | nonemocono   |
|      | PARK RIDGE, IL   | 60068-7219<br>ZIP Code                  | Contingent   | voa anumenoa   |
|      | City State Who incurred the debt? Check one.   | ZIP Code                                | Unliquidated   | and an order property  |
|      | Debtor 1 only  |   | ☐ Disputed   | , in philosophy in   |
|      | Debtor 2 only Debtor 1 and Debtor 2 only   |   | Type of NONPRIORITY unsecured claim:   | TRACT A VANDO  |
|      | At least one of the debtors and another  |   | ☐ Student loans  | - Pulletino  |
|      | ☐ Check if this claim is for a community debt  |   | Obligations arising out of a separation agreement or divorce that you did not report as priority claims  | to me a valancia de la como a valancia de la |
|      | Is the claim subject to offset?  |   | Debts to pension or profit-sharing plans, and other similar debts  | And control of the co |
|      | ✓ No   |   | Other. Specify Medical Services  | Washington and the second and the se |
|      | Yes  |   |  | A  |
| .12  | MEDICAL BUSINESS BUREAU Nonpriority Creditor's Name  |   | Last 4 digits of account number  | \$610.00   |
|      | PO BOX 1219  |   | When was the debt incurred?  | \$010.00   |
|      | Number Street  |   |  | TALEBOOODS AL  |
|      | PARK RIDGE, IL   | 60068-7219                              | As of the date you file, the claim is: Check all that apply.   | MATERIAL PROPERTY AND A MATERI |
|      | City State Who incurred the debt? Check one.   | ZIP Code                                | Contingent   |  |
|      | Debtor 1 only  |   | ☐ Unliquidated ☐ Disputed  |  |
|      | Debtor 2 only  |   | hand Disputed  | and the second   |
|      | Debtor 1 and Debtor 2 only   |   | Type of NONPRIORITY unsecured claim:   | 1 Appellunt Menore   |
|      | At least one of the debtors and another  |   | Student loans  | ri dheek nila  |
|      | Check if this claim is for a community debt  |   | Obligations arising out of a separation agreement or divorce that you did not report as priority claims  | No. of the Control of |
|      | Is the claim subject to offset?  |   | Debts to pension or profit-sharing plans, and other similar debts  | To control of the con |
|      | ✓ No<br>Yes  |   | ✓ Other, Specify Medical Services  | and the commonweal   |
|      |  |   |  |  |

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|     |     |    |

|      | Do any creditors have nonpriority unsecured No. You have nothing to report in this part. S Yes | - •   |  | Photography and the state of th |
|------|--|---|--|--|
|      | nonpriority unsecured claim, list the creditor sep   | arately for each claim<br>is a particular claim, li | order of the creditor who holds each claim. If a creditor has<br>. For each claim listed, identify what type of claim it is. Do not<br>st the other creditors in Part 3.If you have more than three no   | list claims already  |
|      |  |   |  | Total claim  |
| 4.13 | Nicor Gas  |   | Last 4 digits of account number  | The second secon |
|      | PO Box 549   |   | When was the debt incurred?  | \$ Unknown   |
|      | Number Street Attn Legal/Bankruptcy Dept   |   | The was are described to the same of the s | renorman vennorrom   |
|      | Aurora IL  | 60507   | As of the date you file, the claim is: Check all that apply.   | sasevocor can u Anu  |
|      | City State   | ZIP Code  | Contingent   | AAAA   |
|      | Who incurred the debt? Check one.  |   | Unliquidated   | 40.00  |
|      | Debtor 1 only  Debtor 2 only   |   | L. J Disputed  | ****   |
|      | Debtor 1 and Debtor 2 only   |   | Type of NONPRIORITY unsecured claim:   | A power of a contract of the c |
|      | At least one of the debtors and another  |   | Student loans  |  |
|      | ☐ Check if this claim is for a community deb   | <b>i</b>  | Obligations arising out of a separation agreement or divorce that you did not report as priority claims  | v Antonio v  |
|      | Is the claim subject to offset?  |   | Debts to pension or profit-sharing plans, and other similar debts  |  |
|      | ✓ No  ☐ Yes  |   | ✓ Other, Specify Utility Services  | опсительности, с даниц   |
| 1.14 | PNC Bank   |   | Last 4 digits of account number  | \$Unknown  |
|      | Nonpriority Creditor's Name  |   | When was the debt incurred?  |  |
|      | PO Box 489909  |   |  | The same of the sa |
|      | Number Street  |   | As of the date you file, the claim is: Check all that apply.   | usA verified/erv   |
|      | Charlotte NC   | 28269-5329  | ☐ Contingent   |  |
|      | City State   | ZIP Code  | Unliquidated   |  |
|      | Who incurred the debt? Check one.  Debtor 1 only   |   | ☐ Disputed   | arman and the second se |
|      | Debtor 2 only  |   | Type of NONPRIORITY unsecured claim:   |  |
|      | Debtor 1 and Debtor 2 only   |   |  |  |
|      | At least one of the debtors and another  |   | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce   | adden name of the state of the  |
|      | Check if this claim is for a community deb   | t   | that you did not report as priority claims   | nove (Address)   |
|      | Is the claim subject to offset?  |   | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Overdrawn Bank Account  | AMAGASA  |
|      | ✓ No   |   | Other, Specify Overdiam Dark Account   | (Vanish de ser ) ) com   |
|      | Portfolio Recovery svc   |   |  |  |
| .15  | Nonpriority Creditor's Name  |   | Last 4 digits of account number  | <sub>\$</sub> Unknown  |
|      | POB 41067  |   | When was the debt incurred?  |  |
|      | Number Street  |   |  | **************************************   |
|      | Norfolk VA   | 23541   | As of the date you file, the claim is: Check all that apply.   | · - management / Ave   |
|      | City State   | ZIP Code  | ☐ Contingent   | BROOF PURPOSE A  |
|      | Who incurred the debt? Check one.  |   | Unliquidated   | P (MYSTER WAS  |
|      | ✓ Debtor 1 only ☐ Debtor 2 only  |   | ☐ Disputed   | PROFINICIALA   |
|      | Debtor 1 and Debtor 2 only   |   | Type of NONPRIORITY unsecured claim:   | - Constitution of the  |
|      | At least one of the debtors and another  |   | _ <u></u>  | one and  |
|      | ☐ Check if this claim is for a community debt  | :   | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce   | abdoommen vo   |
|      | Is the claim subject to offset?  |   | that you did not report as priority claims   | appoondermission   |
|      | ✓ No   |   | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify   | aspononipaspos   |
|      | Yes  |   |  | respect or the party of the second or the se |
|      |  |   |  | v Apple  |

Debtor 1

Case dubod:4514 Doc 1-1

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|         | o any creditors have nonpriority unsecured  No. You have nothing to report in this part. So Yes |                       |  |  |
|---------|---|-----------------------|--|--|
| n<br>ir | onpriority unsecured claim, list the creditor sepa  | rately for each clain | order of the creditor who holds each claim. If a creditor had a creditor had a creditor had been claim listed, identify what type of claim it is. Do not list the other creditors in Part 3.If you have more than three no | list claims already  |
|         |   |                       |  | Total claim  |
| 4.16    | TCF Bank Nonpriority Creditor's Name  |                       | Last 4 digits of account number  | ngan kangang kangang kangang kangang kang k  |
|         | 801 Marquette Avenue  |                       | •  | <sub>\$</sub> Unknown  |
|         | Number Street   |                       | When was the debt incurred?  |  |
|         | Bankruptcy DEPT   | <del> </del>          |  |  |
|         | Minneapolis MN  | 55402                 | As of the date you file, the claim is: Check all that apply.   |  |
|         | City State  | ZIP Code              | Contingent   |  |
|         | Who incurred the debt? Check one.  Debtor 1 only  |                       | ☐ Unliquidated ☐ Disputed  |  |
|         | Debtor 2 only   |                       |  |  |
|         | Debtor 1 and Debtor 2 only  |                       | Type of NONPRIORITY unsecured claim:   |  |
|         | At least one of the debtors and another   |                       | Student loans  |  |
|         | Check if this claim is for a community debt   |                       | <ul> <li>Obligations arising out of a separation agreement or divorce<br/>that you did not report as priority claims</li> </ul>  |  |
|         | Is the claim subject to offset?   |                       | Debts to pension or profit-sharing plans, and other similar debts  |  |
|         | No  |                       | ☑ Other, Specify Overdrawn Bank Account  | 0  |
|         | Yes   |                       |  |  |
| 4.17    | US Bank   |                       | Last 4 digits of account number  | § Unknown  |
|         | Nonpriority Creditor's Name   |                       | When was the debt incurred?  |  |
|         | 800 Nicollet Mall Number Street   |                       |  |  |
|         |   |                       | As of the date you file, the claim is: Check all that apply.   |  |
|         | Minneapolis MN  | 55402                 | ☐ Contingent   |  |
|         | City State Who incurred the debt? Check one.  | ZIP Code              | Unliquidated   | u pinger pa  |
|         | Debtor 1 only   |                       | ☐ Disputed   |  |
|         | Debtor 2 only   |                       | Type of NONPRIORITY unsecured claim:   | 900  |
|         | Debtor 1 and Debtor 2 only  At least one of the debtors and another                             |                       | Student loans  |  |
|         |   |                       | Obligations arising out of a separation agreement or divorce   |  |
|         | Check if this claim is for a community debt   |                       | that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  |  |
|         | Is the claim subject to offset?   |                       | Other. Specify Overdrawn Bank Account  |  |
|         | [V No<br>Yes  |                       |  | TO CONTRACT OF THE CONTRACT OF |
| 4.18    | chase bank  |                       |  |  |
| 7.10    | Nonpriority Creditor's Name   |                       | Last 4 digits of account number  | \$Unknown  |
|         | 270 Park Ave Number Street  |                       | When was the debt incurred?  | ***************************************  |
|         | Bankruptcy Dept   |                       |  | 200  |
|         | New York NY   | 10017                 | As of the date you file, the claim is: Check all that apply.   | and the same of th |
|         | City State Who incurred the debt? Check one.  | ZIP Code              | Contingent   | P P P P P P P P P P P P P P P P P P P  |
|         | Debtor 1 only   |                       | Unliquidated   | and the state of t |
|         | Debtor 2 only   |                       | ☐ Disputed   | ***************************************  |
|         | Debtor 1 and Debtor 2 only  |                       | Type of NONPRIORITY unsecured claim:   | and the contract of the contra |
|         | At least one of the debtors and another   |                       | Student loans  | Volume   |
|         | Check if this claim is for a community debt   |                       | Obligations arising out of a separation agreement or divorce that you did not report as priority claims  | nvertastislik  |
|         | Is the claim subject to offset?   |                       | Debts to pension or profit-sharing plans, and other similar debts  | VIDENTAFFE   |
|         | ▼ No  |                       | ☑ Other, Specify Overdrawn Bank Account  | nodradiane   |
|         | Yes   |                       |  | AND THE PARTY OF T |

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Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

|              |     |   |     | Total clain |           |
|--------------|-----|---|-----|-------------|-----------|
| Total claims | 6a. | Domestic support obligations  | 6a. | \$          | 0.00      |
| from Part 1  | 6b. | Taxes and certain other debts you owe the government  | 6b. | \$          | 0.00      |
|              | 6c. | Claims for death or personal injury while you were intoxicated  | 6c. | \$          | 0.00      |
|              | 6d. | <b>Other.</b> Add all other priority unsecured claims. Write that amount here.                          | 6d. | + \$        | 0.00      |
|              | 6e. | Total. Add lines 6a through 6d.   | 6e. | \$          | 0.00      |
|              |     |   |     | Total clain |           |
| Total claims | 6f. | Student loans   | 6f. | \$          | 0.00      |
| from Part 2  | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$          | 0.00      |
|              | 6h. | Debts to pension or profit-sharing plans, and other similar debts                                       | 6h. | \$          | 0.00      |
|              | 6i. | Other. Add all other nonpriority unsecured claims. Write that amount here.                              | 6i. | + \$        | 16,290.00 |
|              |     |   |     |             |           |

STATE COLLECTION SVC LEMBAR IAMBOLANCE PO BOX 6250 MADISON, WI 53701

ANDREI SMAON 221 ALPINE COURT SCHAUMBURG, IL 60193

AZAT RENT TO OWN 1411 OAK ST PASADENA, CA 91030-4419

BANK OF AMERICA 100 N. TRYON ST CHARLOTTE, NC 28255

CMI 4200 INTERNATIONAL PKWY CARROLLTON, TX 75007-1912

COMCAST 41112 CONCEPT DR PLYMOUTH, MI 48170

COMMONWEALTH EDISON 3 LINCOLN CENTER ATTN CLAIMS/BANKRUPTCY DEPT OAKBROOK, IL 60181

DGDB LLC C/O PAT WILLIAMS OF EKL WILLIAMS AND 901 WARRENVILLE RD LISLE, IL 60532

EDGARTON AND EDGARTON 12 S. WOOD ST. LAKE IN THE HILLS, IL 60156

ILLINOIS STUDENT COMMISSION ASSISTANCE BANKRUPTCY DEPT 1755 LAKE COOK ROAD DEERFIELD, IL 60015

JESSE MUFF 2931 LIBERTY WESTMONT, IL 60559 KRUEGER ELIZABETH 305 NAPERVILLE ROAD WHEATON, IL 60187

KAHN SANFORD LLP 180 N LASALLE SUITE 2025 CHICAGO, IL 60601

MCCARTHY BURGESS AND WOL 26000 CANNON ROAD BEDFORD, OH 44146

MEDICAL BUSINESS BUREAU PO BOX 1219 PARK RIDGE,, IL 60068-7219

NICOR GAS PO BOX 549 ATTN LEGAL/BANKRUPTCY DEPT AURORA, IL 60507

PNC BANK PO BOX 489909 CHARLOTTE, NC 28269-5329

PETER ABATANGELO 7121 GUNNISON AVE HARWOOD HEIGHTS, IN 60706

PORTFOLIO RECOVERY SVC POB 41067 NORFOLK, VA 23541

SCOTT FISHER 226 NORTH GARFIELD STREET LOMBARD, IL 60148

TCF BANK 801 MARQUETTE AVENUE BANKRUPTCY DEPT MINNEAPOLIS, MN 55402

US BANK 800 NICOLLET MALL MINNEAPOLIS, MN 55402

CHASE BANK 270 PARK AVE BANKRUPTCY DEPT NEW YORK, NY 10017 Case 18-14514 Doc 1-1 Filed 05/18/18 Entered 05/18/18 12:23:05 Desc to attach correct PDF Page 33 of 58

State Form
Outo accident in 2012 \$10,000.4

One State Form Plaza
Bleomington 12,61710 (844)292-8615

Enterpieze Rentacar amount: 4500.00 1001 Luing Park rd. Hanorere Park II, 60133 (855) 266. 9565

Village of Lombard Water Dept For Address 400 s. Addisonaue: 255 E. Wilson and Comboard II, 60148 And: 1250.00

Coast to Coast france / Republic Sinices
101 Hodencamp 1d.
120 Thousand Oaks, Cal 9 1360 (Aut # 14R)
Despage Emergency Physicians
1001 Renassaires dine: # 2000.00
Palatice II, 6008 (800) 438.8146

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|                    |                     | aliau                              | II CUITECLE DE | <u> </u> |                     |
|--------------------|---------------------|------------------------------------|----------------|----------|---------------------|
| Fill in this in    | oformation to ide   | entify your case:                  |                |          |                     |
| Debtor             | Ami M Cutrone       |                                    |                |          |                     |
|                    | First Name          | Middle Name                        | Last Name      |          |                     |
| Debtor 2           |                     |                                    |                |          |                     |
| (Spouse If filing) | First Name          | Middle Name                        | Last Name      |          |                     |
| United States      | Bankrustov Court fo | or the Northern District of Illino | ie             |          |                     |
| Officed States     | Bankrupicy Court to | I RIG HOLDIGHT DISERCE OF HIMO     | ,              | ,        |                     |
| Case number        |                     |                                    |                |          | <b>—</b>            |
| (If known)         |                     |                                    |                |          | Check if this is ar |
|                    |                     |                                    |                |          | amended filing      |
|                    |                     |                                    |                | •        |                     |
|                    |                     | _                                  |                |          |                     |

#### Official Form 106G

#### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.

    Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

|  | Person or company with whom you have the contract or              | lease State what the contract or lease is for |
|--|---|---|
| 2.1  | Name 400 S Add So<br>Street Combard I 6018<br>City State ZIP Code | HOME RENTAL<br>LEASE                          |
| 2.2  | Name  |   |
| AT LANGE COMMISSION OF PROPERTY OF PROPERTY OF THE PROPERTY OF | Street  City State ZIP Code                                       |   |
| 2.3  | Name  |   |
|  | Street  City State ZIP Code                                       |   |
| 2.4  | Name  |   |
| 2.5  | Street  City State ZIP Code                                       |   |
| Transport of the Contract of t | Name  |   |
| THE STREET WAS ASSESSED.   | City State ZIP Code   |   |

Case 18-14514 Doc 1-1 Filed 05/18/18 Entered 05/18/18 12:23:05 Desc to Page 35 of 58 Fill in this information to identify your case: Ami M Cutrone Debtor 1 First Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (If known) Check if this is an amended filing Official Form 106H Schedule H: Your Codebtors Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question. 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) **√** No 2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) Yes. Did your spouse, former spouse, or legal equivalent live with you at the time? Yes. In which community state or territory did you live? \_\_\_\_\_\_. Fill in the name and current address of that person. Name of your spouse, former spouse, or legal equivalent Number Street State ZIP Code 3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2. Column 1: Your codebtor Column 2: The creditor to whom you owe the debt Check all schedules that apply: 3.1 Schedule D, line \_\_\_ Name Schedule E/F, line Street Schedule G, line \_\_\_ City ZIP Code 3.2 Schedule D, line Name Schedule E/F, line \_\_\_\_ Street Schedule G, line \_\_\_\_ City

Official Form 106H

Name

Street

3.3

Schedule H: Your Codebtors

page 1 of \_1\_

Schedule D, line

Schedule E/F, line \_\_\_\_

Schedule G, line \_\_\_\_\_

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| Fill in this in  | formation to identify                                      | your case:   |  |   |   |  |
|--|--|--|--|---|---|--|
| Debtor 1   | Ami M Cutrone  |  |  |   |   |  |
| Debtor 2   | First Name   | Middle Name  | Last Name                              |   |   |  |
| (Spouse, if filing)  | First Name   | Middle Name  | Last Name                              |   |   |  |
| United States B  | lankruptcy Court for the:                                  | Northern District of Illinois  |  | *************************************** |   |  |
| Case number<br>(if known)  |  |  |  | i F                                     | neck if this is:  |  |
|  |  |  |  | - Carrier                               | An amended filing   | t (11 1 1 1 10   |
|  |  |  |  | Ē <sub>mus</sub>                        | A supplement showing<br>income as of the followi  |  |
| Official Fo  | rm 106l  |  |  |   | MM / DD / YYYY  |  |
| <b>Sched</b>   | ule I: You   | ır Income  |  |   |   | 12/15  |
| supplying cor<br>If you are sepa<br>separate shee  | rect information. If yo<br>arated and your spou            | ou are married and not fil<br>use is not filing with you,<br>top of any additional pag | ing jointly, and yo do not include inf | ur spouse is livir<br>ormation about y  | nd Debtor 2), both are equing with you, include informour spouse. If more spacenber (if known). Answer ev | nation about your spouse.  |
| Fill in your informatio  |  |  | Debtor 1                               |   |   | on-filing spouse   |
| attach a se  | more than one job,<br>parate page with<br>about additional | Employment status  | ☐ Employed ✓ Not employe               | ed                                      | Employed Not employ   | yed  |
| Include par<br>self-employ   | t-time, seasonal, or<br>red work.                          |  |  |   |   |  |
| Occupation   | may include student  | Occupation   |  |   | <del></del>   |  |
|  |  | Employer's name  |  |   |   | ***************************************  |
| Parket and the Control of the Contro |  | Employer's address   |  |   |   |  |
| VI Izanie i Providenco dell'   | Employer 3 address   |  | Number Street                          |   | Number Street   |  |
| diada da  |  |  |  |   |   | William Control of the Control of th |
|  |  |  | City                                   | State ZIP Code                          | City  | State ZIP Code   |
|  |  | How long employed the  | re?                                    |   |   | MM, 100 100 100 100 100 100 100 100 100 10   |
| Part 2:  | Give Details About   | Monthly Income   |  |   |   |  |
|  | nonthly income as of<br>ess you are separated.             |  | n. If you have nothi                   | ing to report for an                    | y line, write \$0 in the space.   | Include your non-filing  |
|  |  | ive more than one employe<br>ttach a separate sheet to th                              |  | rmation for all emp                     | oloyers for that person on the  | e lines  |
| Annali da saka makaya samani sa  |  |  |  | For Deb                                 | tor 1 For Debtor 2 or non-filing spou   |  |
|  |  | ary, and commissions (be<br>calculate what the monthly                                 |  | 2. \$                                   | \$  | <del>la la constant</del>  |
| 3. Estimate  | and list monthly over                                      | time pay.  |  | 3. +\$                                  | + \$  |  |
| 4. Calculate   | gross income. Add lii                                      | ne 2 + line 3.   |  | 4. \$                                   | \$  |  |

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Debtor 1

First Name Last Name Middle Name

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|   |             | For        | Debtor 1       | For Debtor 2 or non-filing spouse                    |  |
|---|-------------|------------|----------------|--|--|
| Copy line 4 here  | <b>→</b> 4. | \$         | <del></del>    | \$   |  |
| 5. List all payroll deductions:   |             |            |                |  |  |
| 5a. Tax, Medicare, and Social Security deductions   | 5a.         | \$         |                | \$   |  |
| 5b. Mandatory contributions for retirement plans  | 5b.         |            |                | \$   |  |
| 5c. Voluntary contributions for retirement plans  | 5c.         |            |                | \$   | 9  |
| 5d. Required repayments of retirement fund loans  | 5d.         | \$         |                | \$   |  |
| 5e. Insurance   | 5e.         | \$         |                | \$   |  |
| 5f. Domestic support obligations  | 5f.         | \$         |                | \$   |  |
| 5g. Union dues  | 5g.         | \$         |                | \$   | ***************************************  |
| 5h. Other deductions. Specify:  | 5h.         | + \$       |                | + \$   | The second secon |
| 6. <b>Add the payroll deductions</b> . Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h   | n. 6.       | \$         |                | \$   |  |
| 7. Calculate total monthly take-home pay. Subtract line 6 from line 4.  | 7.          | \$         |                | \$   | 200  |
| 8. List all other income regularly received:  |             |            |                |  |  |
| <ol> <li>Net income from rental property and from operating a business,<br/>profession, or farm</li> </ol>  |             |            |                |  |  |
| Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.   | 8a.         | \$         | 0.00           | \$   |  |
| 8b. Interest and dividends  | 8b.         | \$         | 0.00           | \$   | No.  |
| 8c. Family support payments that you, a non-filing spouse, or a depend<br>regularly receive   | lent        |            |                |  |  |
| Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  | 8c.         | \$         | 0.00           | \$   |  |
| 8d. Unemployment compensation   | 8d.         | \$         | 0.00           | \$   |  |
| 8e. Social Security   | 8e.         | \$         | 0.00           | \$   | 77   |
| 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistathat you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify: | ince<br>8f. | \$         | 0.00           | \$   |  |
|   |             | _          | 0.00           | -  |  |
| 8g. Pension or retirement income  | 8g.         | \$         |                | \$   |  |
| 8h. Other monthly income. Specify:  | 8h.         | +\$        | 0.00           | +\$  |  |
| 9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.  | 9.          | \$         | 0.00           | \$   | VI CONTRACTOR IN |
| 10. Calculate monthly income, Add line 7 + line 9.  |             |            | 0.00           |  | 0.00   |
| Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  | 10.         | \$         | 0.00           | *   \$   | s   s  |
| 11. State all other regular contributions to the expenses that you list in Sche<br>Include contributions from an unmarried partner, members of your household,<br>friends or relatives.   |             |            | nts, your roor | mmates, and other                                    |  |
| Do not include any amounts already included in lines 2-10 or amounts that are<br>Specify:   |             |            | to pay expen   | ses listed in <i>Schedule J.</i><br>11. <del>†</del> | \$ 0.00  |
| 12. Add the amount in the last column of line 10 to the amount in line 11. The Write that amount on the Summary of Your Assets and Liabilities and Certain  | e resul     | t is the o |                | nthly income.  | \$0.00   |
|   |             |            |                |  | Combined monthly income  |
| 13. Do you expect an increase or decrease within the year after you file this   | form        | •          |                |  |  |
| Yes. Explain:   |             |            |                |  |  |
|   |             |            |                |  |  |

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| Fill in this information to identify   | your case:   |  |   |                      |
|--|--|--|---|----------------------|
| Debtor 1 Ami M Cutrone   |  | Check if this  | s is:                                   |                      |
| First Name  Debtor 2   | Middle Name Last Name  | An amer  |   |                      |
| (Spouse, if filing) First Name   | Middle Name Last Name  | - Account  | ement showing post                      | petition chapter 13  |
| United States Bankruptcy Court for the:  | Northern District of Illinois  |  | s as of the following                   | · ·                  |
| Case number(if known)  | , , , , , , , , , , , , , , , , , , ,  | MM / DD  | / YYYY                                  |                      |
| Official Form 106J   | _  |  |   |                      |
| Schedule J: Yo   | ur Expenses  |  |   | 12/15                |
| information. If more space is need<br>(if known). Answer every question  |  |  |   | ·                    |
| St. 1977 (1977)  | usenoia  |  |   |                      |
| 1. Is this a joint case?  No. Go to line 2.  Yes. Does Debtor 2 live in a  No  Yes. Debtor 2 must fi                   | separate household?<br>le Official Form 106J-2, <i>Expenses for</i> S  | Separate Household of Debtor 2.                                |   |                      |
| 2. Do you have dependents?   | □No  | Dependent's relationship to                                    | Dependent's                             | Does dependent live  |
| Do not list Debtor 1 and Debtor 2.   | Yes. Fill out this information for each dependent  | Debtor 1 or Debtor 2   | age                                     | with you?            |
| Do not state the dependents' names.  |  | Anthony Cutrone  | 7                                       | □ No<br>▼Yes         |
|  |  | Linkin Cutrone   | 8                                       | □ No<br><b>V</b> Yes |
|  |  | Aria Cutrone   | 15                                      | □ No<br>V Yes        |
|  |  |  |   | No                   |
|  |  |  | *************************************** | Yes                  |
|  |  |  | *************************************** | No                   |
| Do your expenses include<br>expenses of people other than<br>yourself and your dependents?                             | ☑ <sub>No</sub><br>□ Yes   |  |   |                      |
|  | ing Monthly Expenses   |  |   |                      |
| Estimate your expenses as of you expenses as of a date after the ba applicable date. Include expenses paid for with no | r bankruptcy filing date unless you a<br>nkruptcy is filed. If this is a supplem<br>n-cash government assistance if you<br>d it on Schedule I: Your Income (Offi | ental <i>Schedule J</i> , check the box<br>I know the value of |   | n and fill in the    |
|  | expenses for your residence. Include   |  | 4. \$                                   | 1,300.00             |
| If not included in line 4:   |  |  | ·-                                      |                      |
| 4a. Real estate taxes  |  |  | 4a. \$                                  | 0.00                 |
| 4b. Property, homeowner's, or  | renter's insurance   |  | 4b. \$                                  | 0.00                 |
| 4c. Home maintenance, repair,  | and upkeep expenses  |  | 4c. \$                                  | 0.00                 |
| 4d. Homeowner's association of   | er condominium dues  |  | 4d. \$                                  | 0.00                 |

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Debtor 1

Ami M Cutrone

First Name Last Name

Case number (if known)\_\_

|     |   |            | Your ex | penses |
|-----|---|------------|---------|--------|
| 5.  | Additional mortgage payments for your residence, such as home equity loans  | <b>5</b> . | \$      | 0.00   |
| 6.  |   |            |         |        |
| ъ.  | 6a. Electricity, heat, natural gas  | 6a.        | \$      | 200.00 |
|     | 6b. Water, sewer, garbage collection  | 6b.        | \$      |        |
|     | 6c. Telephone, cell phone, Internet, satellite, and cable services  | 6c.        | \$      | 150.00 |
|     | 6d. Other. Specify:   | 6d.        | \$      | 0.00   |
| 7.  | Food and housekeeping supplies  | 7.         | \$      | 600.00 |
| 8.  | Childcare and children's education costs  | 8.         | \$      | 0.00   |
| 9.  | Clothing, laundry, and dry cleaning   | 9.         | \$      | 800.00 |
| 10. | Personal care products and services   | 10.        | \$      | 200.00 |
| 11. | Medical and dental expenses   | 11.        | \$      | 600.00 |
| 12. | <b>Transportation.</b> Include gas, maintenance, bus or train fare.  Do not include car payments.   | 12.        | \$      | 0.00   |
| 13. | Entertainment, clubs, recreation, newspapers, magazines, and books  | 13.        | \$      | 0.00   |
| 14. | Charitable contributions and religious donations  | 14.        | \$      | 0.00   |
| 15. | Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.   |            |         |        |
|     | 15a. Life insurance   | 15a.       | \$      | 0.00   |
|     | 15b. Health insurance   | 15b.       | \$      | 0.00   |
|     | 15c. Vehicle insurance  | 15c.       | \$      | 0.00   |
|     | 15d. Other insurance. Specify:  | 15d.       | \$      | 0.00   |
| 16. | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:  | 16.        | \$      | 0.00   |
| 17. | Installment or lease payments:  |            |         |        |
|     | 17a. Car payments for Vehicle 1   | 17a.       | \$      | 0.00   |
|     | 17b. Car payments for Vehicle 2   | 17b.       | \$      | 0.00   |
|     | 17c. Other. Specify:  | 17c.       | \$      | 0.00   |
|     | 17d. Other. Specify:  | 17d.       | \$      | 0.00   |
| 18, | Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18.        | \$      | 0.00   |
| 19. | Other payments you make to support others who do not live with you.   |            |         |        |
|     | Specify:  | 19.        | \$      | 0.00   |
| 20. | Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom   | e.         |         |        |
|     | 20a. Mortgages on other property  | 20a.       | \$      | 0.00   |
|     | 20b. Real estate taxes  | 20b.       | \$      | 0.00   |
|     | 20c. Property, homeowner's, or renter's insurance   | 20c.       | \$      |        |
|     | 20d. Maintenance, repair, and upkeep expenses   | 20d.       | \$      | 0.00   |
|     | 20e. Homeowner's association or condominium dues  | 20e.       | \$      | 0.00   |

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| Debtor 1   | Ami M Cutron   | 8               |                   |                         | c   | ase number (# kn   | nwn)                                |            |  |
|--|----------------|-----------------|-------------------|-------------------------|---|--|-------------------------------------|------------|--|
|  | st Name        | Middle Name     | Last Name         |                         | _   |  | ***                                 |            |  |
|  |                |                 |                   |                         |   |  |                                     |            |  |
| i. Other. Spec   | cify:          |                 |                   |                         | ***************************************   |  | 21.                                 | +\$        | 0.00   |
|  |                | <del></del>     |                   |                         |   |  |                                     | +\$        |  |
|  |                |                 |                   |                         |   |  |                                     | +\$        |  |
| 2. Calculate y   | our month      | ly expenses.    |                   |                         |   |  |                                     |            |  |
| 22a. Add line  | es 4 through   | 21.             |                   |                         |   |  | 22a.                                | \$         | 3,950.00   |
| 22b. Copy lir  | ne 22 (mont    | nly expenses    | for Debtor 2), if | any, from Official F    | orm 106J-2 22c. A   | Add line 22a   | 22b.                                | \$         |  |
| and 22b. The   | e result is yo | our monthly ex  | rpenses.          |                         |   |  | 22c.                                | \$         | 3,950.00   |
| 3. Calculate you   | ur monthiv     | net income.     |                   |                         |   |  |                                     |            |  |
| •  | •              |                 | nthly income) fr  | om Schedule I.          |   |  | 23a.                                | \$         | 0.00   |
| 23b. Copy yo   | our monthly    | expenses fro    | m line 22c abov   | /e.                     |   |  | 23b,                                | <b></b> \$ | 3,950.00   |
| 23c. Subtrac   | ct your mon!   | hly expenses    | from your mont    | thly income.            |   |  |                                     |            | -3,950.00  |
| The res  | sult is your n | monthly net ind | come.             |                         |   |  | 23c.                                | <u> </u>   | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,  |
| . Do vou expe  | ct an incre    | ase or decrea   | se in vour exp    | enses within the y      | ear after vou file  | this form?   |                                     |            |  |
|  |                |                 |                   | ar loan within the ye   |   |  |                                     |            |  |
|  |                |                 |                   | f a modification to the |   | -  |                                     |            |  |
| ✓ No.  |                |                 |                   |                         |   |  |                                     |            |  |
| Yes. E   | Explain here   |                 |                   |                         | O-11116-11 - O-1-1111 | to Market of the Mark Association (Market Lychollyto Lycy)           | and the second second second second |            | -1-1-0-1-11111111111111111111111111111   |
|  | •              |                 |                   |                         |   |  |                                     |            |  |
|  |                |                 |                   |                         |   |  |                                     |            |  |
|  |                |                 |                   |                         |   |  |                                     |            |  |
| Quantização de la constitución d | .,,            |                 |                   |                         | et Sallater Victoria et la trata de la como d   | e) Lance a moles Lance behilder volver assendavil A. Adeisobelevende |                                     |            | in d'o matteriolise d'Annie (200 v.) Mainten d'ouinnime (ou de la little de la litte de la little de la little |

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| Fill in this in     | formation to ide | ntify your case:                           |           |  |
|---------------------|------------------|--|-----------|--|
| Debtor 1            | Ami M Cutron     | IC Middle Name                             | Last Name |  |
| Debtor 2            |                  |  | Last Name |  |
| (Spouse, if filing) |                  | Middle Name  the Northern District of Illi |           |  |
| Case number         |                  | TO NOTIFIE DISTRICT OF THE                 | TiUlo     |  |
| (If known)          |                  |  |           |  |

### Official Form 106Dec

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| No   |  |
|--|--|
| I Yes. Name of person  | . Attach Bankruptcy Petition Preparer's Notice, Declaration, and |
|  | Signature (Official Form 119).                                   |
|  |  |
|  | the summary and schedules filed with this declaration and        |
| inder penaity of perjury, I declare that I have read that they are true and correct. | he summary and schedules filed with this declaration and         |
|  | he summary and schedules filed with this declaration and         |
|  | the summary and schedules filed with this declaration and        |

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| ill in this inform   | ation to identify                     | vour case:  |  |  |   |
|--|---------------------------------------|---|--|--|---|
| Λmi  | M Cutrone                             |   |  |  |   |
| Pebtor 1 First N   |                                       | Middle Name   | Last Name  | The state of the s |   |
| ebtor 2<br>Spause, if filing) First N                                | ame                                   | Middle Name   | Last Name  |  |   |
| nited States Bankri  | uptcy Court for the:                  | Northern District of Illinoi  | s  |  |   |
| ase number<br>fknown)  |                                       | MANAGEMENT OF THE PROPERTY OF |  |  | ☐ Check if this is an   |
|  |                                       |   |  |  | amended filing  |
| fficial Fori   | m 107                                 |   |  |  |   |
|  |                                       | ncial Affair  | s for Indiv                                      | iduals Filing for Ba   | nkruptcy 4/16   |
| as complete an   | d accurate as po                      | ssible. If two marrie   | d people are filin                               | g together, both are equally responsi  | ble for supplying correct   |
| rmation. If mo   | re space is need                      | ed, attach a separat  | e sheet to this for                              | m. On the top of any additional pages  | s, write your name and case   |
| nder (it known).   | . Answer every q                      | uestion.  |  |  |   |
| art 1: Give  | Details About '                       | Your Marital State  | ıs and Where Y                                   | ou Lived Before  |   |
|  |                                       |   |  |  |   |
| hall-sain season a   |                                       | -4  |  |  |   |
| _  | urrent marital st                     | atus?   |  |  |   |
| ☐ Married  |                                       | atus?   |  |  |   |
| -  |                                       | atus?   |  |  |   |
| Married Not married  | i                                     | atus?<br>ou lived anywhere o  | ther than where y                                | ou live now?   |   |
| Married Not married  During the las                                  | d<br>t 3 years, have y                | ou lived anywhere o   | _  |  |   |
| ☐ Married ☐ Not married  During the las ☐ No ☐ Yes. List al          | t 3 years, have you                   | ou lived anywhere o   | ars. Do not includ                               | e where you live now.  | Dates Debtor 2  |
| ☐ Married ☐ Not married ☐ During the las ☐ No                        | t 3 years, have you                   | ou lived anywhere o   | _  |  | Dates Debtor 2<br>lived there                                       |
| ☐ Married ☐ Not married ☐ During the las ☐ No ☐ Yes. List al         | t 3 years, have you                   | ou lived anywhere o   | ars. Do not includ                               | e where you live now.  |   |
| ☐ Married ☐ Not married ☐ No ☐ No ☐ Yes. List al ☐ Debtor 1          | d 3 years, have you of the places you | ou lived anywhere o   | ars. Do not includ                               | Debtor 2:  | divided there   |
| ☐ Married ☑ Not married ☐ During the las ☑ No ☐ Yes. List al         | t 3 years, have you                   | ou lived anywhere o   | ars. Do not include  Dates Debtor 1  lived there | e where you live now.  Debtor 2:   | lived there  Same as Debtor 1                                       |
| ☐ Married ☐ Not married ☐ Not married ☐ No ☐ Yes. List al ☐ Debtor 1 | d 3 years, have you of the places you | ou lived anywhere o   | Dates Debtor 1 lived there                       | Debtor 2:  | lived there  Same as Debtor 1  From                                 |
| ☐ Married ☐ Not married ☐ No ☐ No ☐ Yes. List al ☐ Debtor 1          | d 3 years, have you of the places you | ou lived anywhere o   | Dates Debtor 1 lived there                       | Debtor 2:  Same as Debtor 1  Number Street   | lived there  Same as Debtor 1  From                                 |
| Married Not married  During the las No Yes. List al Debtor 1         | d 3 years, have you of the places you | ou lived anywhere o   | Dates Debtor 1 lived there                       | Debtor 2:  Same as Debtor 1  Number Street   | Ilved there  Same as Debtor 1  From  To                             |
| Married Not married  During the las No Yes. List al Debtor 1         | d 3 years, have you of the places you | ou lived anywhere o   | Dates Debtor 1 lived there  FromTo               | Debtor 2:  Same as Debtor 1  Number Street  City State   | Ilved there  Same as Debtor 1  From  To  ZIP Code                   |
| Married Not married  During the las No Yes. List al Debtor 1         | d 3 years, have you of the places you | ou lived anywhere o   | Dates Debtor 1 lived there                       | Debtor 2:  Same as Debtor 1  Number Street  City State   | Ilved there  Same as Debtor 1  From  To  ZIP Code  Same as Debtor 1 |

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

✓ No

Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

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|                            |  |  | attach corr   | ect PD                                 | OF Page 43 of   | f 58   |  |
|----------------------------|--|--|---|--|---|--|--|
| ebtor 1                    | Ami M Cutrone  |  |   |  | Case nu   | mber (if known)  |  |
| Part 2                     | First Name Middle Name  Explain the Source   |  | Name  |  |   |  |  |
|                            |  |  |   |  |   |  |  |
| Fill<br>If yo              | in the total amount of inco<br>ou are filing a joint case an<br>No   | me you received  | l from all jobs an  | d all busir                            | nesses, including part-tin  |  | dar years?   |
| u                          | Yes. Fill in the details.  |  |   |  |   |  |  |
|                            |  |  | Debtor 1  |  |   | Debtor 2   |  |
|                            |  |  | Sources of inco<br>Check all that ap  |  | Gross income<br>(before deductions and<br>exclusions)                           | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions and<br>exclusions)            |
|                            | From January 1 of curre<br>the date you filed for ba   |  | ☐ Wages, combonuses, tip☐ Operating a   | s                                      | \$  | ☐ Wages, commissions, bonuses, tips ☐ Operating a business   | \$   |
|                            | For last calendar year: (January 1 to December   | 31,)   | ☐ Wages, combonuses, tip☐ Operating a   | S                                      | \$  | <ul><li>☐ Wages, commissions, bonuses, tips</li><li>☐ Operating a business</li></ul>                             | \$   |
|                            | The second secon | YYYY   |   |  | A <sub>0</sub> **********   |  |  |
|                            | For the calendar year b  |  | Wages, combonuses, tip Operating a  | s                                      | \$  | <ul><li>☐ Wages, commissions, bonuses, tips</li><li>☐ Operating a business</li></ul>                             | \$   |
| Incl<br>and<br>win<br>List | d other public benefit paym<br>nings. If you are filing a joi<br>deach source and the gros   | whether that inc<br>ents; pensions;<br>nt case and you   | ome is taxable. E<br>rental income; in<br>have income tha<br>each source sepa | Examples<br>terest; div<br>at you reco | of other income are aling idends; money collected elived together, list it only |  | ecurity, unemployment, d gambling and lottery                    |
|                            |  | Source:<br>Describe  | s of income<br>e below.   | each so                                | leductions and  | Sources of income<br>Describe below.   | Gross income from each source (before deductions and exclusions) |
|                            |  |  |   | \$                                     |   |  | \$   |
| ear ur                     | anuary 1 of current<br>ntil the date you<br>r bankruptcy:  |  |   | \$<br>\$                               |   |  | \$<br>\$   |
| . automorphism             | And an alternative statement the second term and the second at the second of the second second term and the se<br>The second s   | and the control of th |   |  |   | and the second |  |
| or last                    | calendar year:   |  |   | \$                                     |   |  | \$   |
| anuary                     | y 1 to   |  |   | \$                                     |   |  | \$   |
| naamh                      | or 31  |  |   | Ψ                                      |   |  | ₽  |

For the calendar year

before that: (January 1 to December 31, \_

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Debtor 1

Ami M Cutrone Case number (if known)\_

| (B)               | List Certa                              | in Paym  | ents You              | Made Before      | e You Filed fo                           | or Bankruptcy  |   |  |
|-------------------|---|--|-----------------------|------------------|--|--|---|--|
| re eith           | ner Debtor 1                            | 's or Debt   | tor 2's debi          | ts primarily co  | onsumer debts?                           | ?  |   |  |
| ☐ No.             |   |  |                       |                  |  | t <b>s.</b> Consumer debts are d<br>usehold purpose."  | efined in 11 U.S.C. § 101(8   | ) as   |
|                   | During the                              | 90 days b∉   | efore you fil         | led for bankrup  | otcy, did you pay                        | any creditor a total of \$6  | ,425* or more?  |  |
|                   | ☐ No. Go                                | to line 7.   |                       |                  |  |  |   |  |
|                   | the to                                  | al amount  | t you paid th         | nat creditor. Do | not include pay                          | 6,425* or more in one or i<br>vments for domestic supp<br>ents to an attorney for this   | ort obligations, such as  |  |
|                   | * Subject to                            | adjustme   | ent on 4/01/          | 19 and every 3   | years after that                         | for cases filed on or afte   | r the date of adjustment.   |  |
| ] Yes             | . Debtor 1 o                            | r Debtor 2   | 2 or both h           | ave primarily    | consumer debt                            | s.   |   |  |
|                   |   |  |                       | -                |  | any creditor a total of \$6  | 00 or more?   |  |
|                   | ✓ No. Go                                | to line 7.   |                       |                  |  |  |   |  |
|                   | cr                                      | editor. Do   | not include           | payments for o   | domestic suppor                          | 600 or more and the total<br>rt obligations, such as chi<br>for this bankruptcy case.  |   |  |
|                   |   |  |                       |                  | Dates of payment                         | Total amount paid  | Amount you still owe  | Was this payment for.  |
|                   | BANKAN                                  |  |                       |                  |  | \$   | <b>\$</b>   | ☐ Mortgage   |
|                   | Credito                                 | r's Name   |                       |                  |  |  |   | Car  |
|                   | Numbe                                   | Street   |                       | <del></del>      |  |  |   | Credit card  |
|                   |   |  |                       |                  |  |  |   | Loan repayment   |
|                   |   |  |                       |                  |  |  |   | Suppliers or vendor  |
|                   | City                                    |  | State                 | ZIP Code         |  |  |   | Other  |
|                   | an serveral desirence                   | ***************************************  |                       |                  |  | -  | **************************************  |  |
|                   | Credito                                 | r's Name   |                       |                  |  | \$   | \$  | ☐ Mortgage   |
|                   | J. 52110                                |  |                       |                  |  |  |   | ☐ Car  |
|                   | Numbe                                   | Street   |                       |                  |  |  |   | Credit card  |
|                   |   |  |                       |                  |  |  |   | Loan repayment   |
|                   | <del></del>                             |  |                       |                  |  |  |   | Suppliers or vendor  |
| 12 450 2 2 2 4 40 | City                                    | and and devision   | State                 | ZIP Code         | enderet de de englete de deserve en de d |  |   | Other_   |
|                   | *************************************** | graphic transfer and the second of the secon | transpolinia contrata |                  | ·  | and the second s | e er sæstemer meg er ser minde enn i er er er til er er er er til et er | e organization of the second s |
|                   |   |  |                       |                  |  | \$   | \$  | ☐ Mortgage   |
|                   |   | r's Name   |                       |                  |  | -  |   | ☐ Mortgage   |
|                   | Credito                                 |  |                       |                  |  |  |   |  |
|                   | Credito                                 |  |                       |                  |  |  |   |  |
|                   | Numbe                                   |  |                       | 100 mm           |  |  |   | Credit card  |

Other\_

City

State

ZIP Code

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| r 1<br>Within 1<br>Insiders | First Name Middle Nai                               | me Last Name   |  |  | Case number (it known)_                    |  |
|-----------------------------|---|--|--|--|--|--|
| Within 1                    |   |  |  |  |  |  |
| corpora<br>agent, ir        | s include your relatives<br>ations of which you are | an officer, director, perso<br>iness you operate as a se | latives of any ge<br>on in control, or o   | neral partners; par<br>wner of 20% or m  | rtnerships of which<br>ore of their voting | ho was an insider?  n you are a general partner; securities; and any managing domestic support obligations,  |
| ☑ No<br>□ Yes.              | s. List all payments to a                           | ın insider.  | Dates of payment   | Total amount paid                        | Amount you still owe                       | Reason for this payment  |
| Īns                         | sider's Name  |  | Manufacture states for the same of the sam | \$                                       | \$   |  |
| Nu                          | ımber Street  |  |  |  |  |  |
| <del></del>                 | tv  | State ZIP Code   | ***************************************  |  |  |  |
|                             |   |  |  | \$                                       | \$   |  |
|                             | sider's Name<br>umber Street                        |  | ***************************************  |  |  |  |
|                             |   |  |  |  |  |  |
| Cit                         |   | State ZIP Code   | ou make anv pav  | ments or transfe                         | r anv property on                          | account of a debt that benefited   |
| an insid                    | der?  | uaranteed or cosigned by                                 |  | ,  | 7  |  |
| ☑ No<br>□ Yes               | s. List all payments tha                            | t benefited an insider.                                  |  | e o o o o o o o o o o o o o o o o o o o  | ana nasahing na                            | and the second of the second o |
|                             |   |  | Dates of<br>payment  | Total amount paid                        | Amount you still owe                       | Reason for this payment Include creditor's name  |
| Int                         | sider's Name  |  |  | \$                                       | \$   | ** Control and a state of the s |
|                             |   |  | ******   |  |  | The second secon |
| Nu                          | umber Street  |  |  |  |  |  |
| Nu                          |   | State ZIP Code   |  | en e | anna an ann an t-an t-an t-an t-an t-an    |  |

ZIP Code

Insider's Name

Number Street

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Case number (if known)\_

Debtor 1

Ami M Cutrone

| ithin 1 year before you filed for bank<br>st all such matters, including personal i<br>ad contract disputes.                                     | ruptcy, were yo<br>injury cases, sm     | ou a party in any lav<br>all claims actions, di  | vsuit, court action, o<br>vorces, collection suit               | r administi<br>s, paternity                      | ative proceed<br>actions, suppor | ing?<br>t or custody modification        |
|--|---|--|---|--|----------------------------------|--|
| No<br>Yes. Fill in the details.  | 110111A                                 |  |   | 555 N. E. S. |                                  |  |
|  | Nature of                               | the case   | Court or agen   | cy   |                                  | Status of the case                       |
| Andrei Smaon   | judgment                                |  | Cook County   | Court Civil I                                    | Division                         | П - »                                    |
|  |   |  | Court Name  | ······································           |                                  | — Pending                                |
|  |   |  | 50 West Wasl  | nington Stre                                     | et                               | On appeal                                |
|  |   |  | Number Street   |  |                                  | ✓ Concluded                              |
|  |   |  | Chicago   | IL   | 60602                            |  |
| se number 2011-M1703033  |   | a transportation and a second  | City  | State  | ZIP Code                         | en e |
| Abatangelo vs Ami Cutrone  | - A211                                  |  | Cook county of  | court Civil D                                    | ivision                          | — Pending                                |
| se title:  |   |  | 50 West Was   | nington Stre                                     | et                               | On appeal Concluded                      |
|  |   |  | Chicago   | IL   | 60602                            |  |
| se number M1728120   | P C C C C C C C C C C C C C C C C C C C |  | City  | State  | ZIP Code                         | ··········                               |
| neck all that apply and fill in the details  |   | y of your property   | repossessed, foreck   | osed, garni                                      | shed, attached                   | i, seized, or levied?                    |
|  |   | y of your property   |   | osed, garni                                      | shed, attached                   | i, seized, or levied?                    |
| heck all that apply and fill in the details  |   | garaga kagas ti miligi   |   | osed, garni                                      | e sees see N. C.                 | Miller - Oresto i vice                   |
| heck all that apply and fill in the details  |   | garaga kagas ti miligi   |   | osed, garni                                      | e sees see N. C.                 | Miller - Oresto i vice                   |
| heck all that apply and fill in the details  No. Go to line 11.  Yes. Fill in the information below.   |   | Describe the proper  |   | osed, garni                                      | e sees see N. C.                 | Miller - Oresto i vice                   |
| heck all that apply and fill in the details  No. Go to line 11.  Yes. Fill in the information below.   |   | Describe the proper  | ty<br>ned   | osed, garni                                      | e sees see N. C.                 | Miller - Oresto i vice                   |
| neck all that apply and fill in the details  No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name                            |   | Describe the proper  | ned<br>repossessed.   | osed, garni                                      | e sees see N. C.                 | Miller - Description                     |
| heck all that apply and fill in the details  No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name                            |   | Explain what happe Property was Property was   | ned repossessed. foreclosed.                                    | osed, garni                                      | e sees see N. C.                 | Miller - Description                     |
| heck all that apply and fill in the details  No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name                            | s below.                                | Explain what happe Property was Property was Property was  | ned<br>repossessed.<br>foreclosed.<br>garnished.                |  | e sees see N. C.                 | Miller - Oresto i vice                   |
| heck all that apply and fill in the details  No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name                            |   | Explain what happe Property was Property was Property was  | ned repossessed. foreclosed.                                    |  | Date                             | Value of the property                    |
| neck all that apply and fill in the details  No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name  Number Street             | s below.                                | Explain what happe Property was Property was Property was  | ned repossessed. foreclosed. garnished. attached, seized, or le |  | e sees see N. C.                 | Miller - Oresto i vice                   |
| neck all that apply and fill in the details  No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name  Number Street             | s below.                                | Explain what happe Property was Property was Property was Property was Property was                    | ned repossessed. foreclosed. garnished. attached, seized, or le |  | Date                             | Value of the property                    |
| neck all that apply and fill in the details  No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name  Number Street             | s below.                                | Explain what happe Property was Property was Property was Property was Property was                    | ned repossessed. foreclosed. garnished. attached, seized, or le |  | Date                             | Value of the property                    |
| neck all that apply and fill in the details  No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name  Number Street             | s below.                                | Explain what happe Property was Property was Property was Property was Property was                    | ned repossessed. foreclosed. garnished. attached, seized, or le |  | Date                             | Value of the property                    |
| neck all that apply and fill in the details  No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name  Number Street  City State | s below.                                | Explain what happe Property was Property was Property was Property was Property was                    | ned repossessed. foreclosed. garnished. attached, seized, or le |  | Date                             | Value of the property                    |
| heck all that apply and fill in the details  No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name  Number Street  City State | s below.                                | Explain what happe Property was Property was Property was Property was Property was                    | ned repossessed. foreclosed. garnished. attached, seized, or le |  | Date                             | Value of the property                    |
| heck all that apply and fill in the details  No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name  Number Street  City State | s below.                                | Explain what happe Property was Property was Property was Property was Property was Explain what happe | ned repossessed. foreclosed. garnished. attached, seized, or le |  | Date                             | Value of the property                    |
| heck all that apply and fill in the details  No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name  Number Street  City State | s below.                                | Explain what happe Property was Property was Property was Property was Property was Explain what happe | ned repossessed. foreclosed. garnished. attached, seized, or le |  | Date                             | Value of the property                    |
| heck all that apply and fill in the details  No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name  Number Street             | s below.                                | Explain what happe Property was Property was Property was Property was Property was                    | ned repossessed. foreclosed. garnished. attached, seized, or le |  | Date                             | Value of the property                    |

Debtor 1

First Name Middle Name

Case number (if known)\_

#### Continuation Sheet for Official Form 107

9) Lawsuits

Case Title: Sarah Balassa vs Ami Cutrone

Case Number: m2001221

Court Name: Cook County Court Civil Court Division

Court Address: 50 West Washington Street, Chicago, IL 60602

Last Name

Case Status: Concluded

Nature of the case: Civil Judgment

\_\_\_\_\_

Case Title: Fisher vs Ami Cutrone

Case Number:

Court Name: 1th Judicial Circuit court

Court Address: 505 County Farm Road, Wheaton, IL 60187

Case Status: Concluded

Nature of the case: civil judgement post eviction; Date filed: 01/01/2015

Case Title: CITIMORTGAGE INC -VS- FRANK MARKOS

Case Number: 2014CH002073

Court Name: 18th Judicial Circuit Court

Court Address: 505 N. County Farm Road,, Wheaton, ID 60187

Case Status: Concluded

Nature of the case: civil judgment; Date filed: 11/14/2014

\_\_\_\_\_

Case Title: AZAT RENT TO OWN LLC -VS- AMY CUTRON

Case Number: 2014LM003858

Court Name: 18th Judicial Circuit Court

Court Address: 505 N. County Farm Road,, Wheaton, IL 60187

Case Status: Concluded

Nature of the case: civil judgment post eviction; Date filed: 12/03/2014

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Case Title: KRUEGER ELIZABETH L PC -VS- AMI CUTRONE

Debtor 1

First Name

Last Name

#### Continuation Sheet for Official Form 107

Case Number: 2016SC003054

Court Name: 18th Judicial Circuit Court

Court Address: 505 N. County Farm Road, Wheaton, IL 60187

Case Status: Concluded

\_ \_ = - - -

Nature of the case: Civil Judgment; Date filed: 08/02/2016

Case # : 2018 LM 000999

Mark Ellist: Plaintiff

Lawyers: Sanford Kahnllp (no longer oncase-nameing anyway)

Dipage AH # 41670

400 s. Addison Ave Lombard et, 60148 & mail to Mark Ellist

Case filed 4/18/2018 Amount: \$12,205,00

Cwil Judgement

. . . . . . . .

Lori Quist Civil Jugement Mark Elliot plaintiff: Case: 2017LM001649 Amount \$6,000,00 MORK Elliot 400 s. Addison ave Combard II, LeD148

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| ithin 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your counts or refuse to make a payment because you owed a debt?    No   Yes. Fill in the details.   Describe the action the creditor took   Date action was taken   Amount was taken   Sitest   Sitest   ZIP Code   Last 4 digits of account number: XXXX—    Ithin 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of recitors, a court-appointed receiver, a custodian, or another official?   No   Yes   List Certain Gifts and Contributions   List Certain Gifts and Contributions   No   Yes   List Certain Gifts   No   Yes   List C      | 1          | Ami M Cutrone  | Case number (if known)   |   |
|---|------------|--|--|---|
| thin 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your secounts or refuse to make a payment because you owed a debt?    No  |            | First Name Middle Name Last  | Name -   |   |
| Describe the action the creditor took  Date action  Amount  Describe the action the creditor took  Date action  Amount  Describe the action the creditor took  Date action  Amount  Describe the action the creditor took  Date action  Amount  Describe the action the creditor took  Date action  Amount  Describe the action the creditor took  Date action  Amount  Describe the action the creditor took  Date action  Amount  Describe the action the creditor took  Date action  Amount  Describe the action the creditor took  Date action  Amount  Describe the action the creditor took  Date action  Amount  Describe the action the creditor took  Date action  Amount  Describe the action the creditor took  Date action  Amount  Describe the possession of an assignee for the benefit of the benefit of the action the creditor took  Describe the possession of an assignee for the benefit of the action to the benefit of the action to the possession of an assignee for the benefit of the action to the possession of an assignee for the benefit of the action to the possession of an assignee for the benefit of the action to the possession of an assignee for the benefit of the action to the possession of an assignee for the benefit of the action to the possession of an assignee for the benefit of the action to the possession of an assignee for the benefit of the action to the possession of an assignee for the benefit of the action to the possession of an assignee for the benefit of the action to the possession of an assignee for the benefit of the action to the possession of an assignee for the benefit of the action to the possession of an assignee for the benefit of the action to the possession of an assignee for the benefit of the action to the possession of an assignee for the benefit of the action to the possession of an assignee for the benefit of the action to the possession of an assignee for the benefit of the action to the possession of an assignee for the benefit of the action to the possession of an assignee for the benefit of th      |            |  | •  |   |
| No Yes, Fill in the details.  Describe the action the creditor took  Date action was taken  Condition's Name  Number Street  City State ZIP Cose Last 4 digits of account number: XXXX—  Tithin 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of editors, a court-appointed receiver, a custodian, or another official?  No Yes  List Certain Gifts and Contributions  Tithin 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  No Yes, Fill in the details for each gift.  Gifts with a total value of more than \$600 per person?  Person to Whom You Gave the Gift  Number Street  City State ZiP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person?  Describe the gifts  Describe the gifts  Value the gifts  S   | /ithir     | 1 90 days before you filed for bankru  | ptcy, did any creditor, including a bank or financial institution, set o   | off any amounts from your                             |
| Pescribe the action the creditor took  Date action was taken  Number Street  Number Street  Last 4 digits of account number: XXXX—  Tithin 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of reditors, a court-appointed receiver, a custodian, or another official?  No  Yes  List Certain Gifts and Contributions  Tithin 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  No  Yes, Fill in the details for each gift.  Gifts with a total value of more than \$600 per person?  Show the stotal value of more than \$600 per person?  Show the gifts that gifts the gifts that total value of more than \$600 per person?  Show the gifts that gifts the   | ccor       | ints or refuse to make a payment bed   | cause you owed a debt?   |   |
| Describs the action the creditor took    Date action   Amount   | n C        |  |  |   |
| No   Yes   State   ZiP Coas   Last 4 digits of account number; XXXX—   State   ZiP Coas   Last 4 digits of account number; XXXX—   State   ZiP Coas   Last 4 digits of account number; XXXX—   State   ZiP Coas   Last 4 digits of account number; XXXX—   State   ZiP Coas   Last 4 digits of account number; XXXX—   State   State   ZiP Coas   Last 4 digits of account number; XXXX—   State   S        | ] Ye       | es. Fill in the details.   |  |   |
| Number Street    Number Street   S   S  |            |  | Describe the action the creditor took Date   | action Amount   |
| Number Street  City State ZiP Code Last 4 digits of account number: XXXX—  Inthin 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of reditors, a court-appointed receiver, a custodian, or another official?  I No I Yes  State Certain Gifts and Contributions  Ithin 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  I No I Yes, Fill in the details for each gift.  Gifts with a total value of more than \$600 Describe the gifts  Person to Whom You Gave the Gift  Substant Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 Describe the gifts  Substant Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 Describe the gifts  Substant Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 Describe the gifts  Substant Street  City State ZIP Code  Person's relationship to you  Substant Street  City State ZIP Code  Person's relationship to you  Substant Street  City State ZIP Code  Person's relationship to you  Substant Street  City State ZIP Code  Substant Street  City Street  Substant Street  Substant Street  Substant Street |            |  |  | aken  |
| City State ZIP Cose Last 4 digits of account number: XXXX—  State ZIP Cose Last 4 digits of account number: XXXX—  State JiP Cose Last 4 digits of account number: XXXX—  State JiP Cose Last 4 digits of account number: XXXX—  State JiP Cose Last 4 digits of account number: XXXX—  State JiP Cose Last 4 digits of account number: XXXX—  Ithin 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of redictors, a court-appointed receiver, a custodian, or another official?  INO  1 Yes  State ZIP Cose Last 4 digits of account number: XXXX—  State ZIP Cose Last 4 digits of account number: XXXX—  In thin 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of redictors.  In thin 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  Outes you gave the gifts  Sumber Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person.  Describe the gifts  Detes you gave Value the gifts  Sumber Street  City State ZIP Code  Person's relationship to you  Sit with a total value of more than \$600 per person.  | Cre        | editor's Name  | ent-of-blocked and page 100 common controlled blocked by any or the common controlled blocked by any or the common controlled blocked by any or the common controlled blocked blocked by any or the common controlled blocked blocked by any or the common controlled blocked  |   |
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| Ithin 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of reditors, a court-appointed receiver, a custodian, or another official?    No  | Nu         | mber Street  |  |   |
| Ithin 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of reditors, a court-appointed receiver, a custodian, or another official?    No  |            |  |  |   |
| Ithin 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of reditors, a court-appointed receiver, a custodian, or another official?    No  |            |  |  |   |
| Ithin 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of reditors, a court-appointed receiver, a custodian, or another official?    No  | Cit        | y State ZIP Code   | Last 4 digits of account number: XXXX-   |   |
| reditors, a court-appointed receiver, a custodian, or another official?    No   Yes   |            |  |  |   |
| reditors, a court-appointed receiver, a custodian, or another official?    No   Yes   | /ithii     | n 1 vear before you filed for bankrupt   | tcy, was any of your property in the possession of an assignee for t   | he benefit of   |
| Ithin 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  No Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person?  Person to Whom You Gave the Gift  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person  Dates you gave the gifts  \$   | redit      | tors, a court-appointed receiver, a cu   | stodian, or another official?  |   |
| List Certain Gifts and Contributions  Ithin 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  No Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person?  Person to Whom You Gave the Gift  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person.  Dates you gave the gifts  \$  |            |  | ,  |   |
| List Certain Gifts and Contributions  Ithin 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  No Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Describe the gifts  Dates you gave the gifts  Person to Whom You Gave the Gift  Sumber Street  City State ZIP Code  Person's relationship to you  Describe the gifts  Dates you gave the gifts  Sitts with a total value of more than \$600 per person  Describe the gifts  Dates you gave the gifts  Sitts with a total value of more than \$600 per person  Dates you gave the gifts  Sitts with a total value of more than \$600 per person  Sitts with a total value of more than \$600 per person  Sitts with a total value of more than \$600 per person   | -          |  |  |   |
| ithin 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  No Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street  City State ZIP Code Person's relationship to you  Gifts with a total value of more than \$600 per person  Describe the gifts  S   | <b>.</b>   | 53   |  |   |
| ithin 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  No Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street  City State ZIP Code Person's relationship to you  Gifts with a total value of more than \$600 per person  Describe the gifts  S   | 5:         | List Certain Gifts and Contribu  | utions   |   |
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| No Person to Whom You Gave the Gift  Number Street  City State ZIP Code Person's relationship to you  Gifts with a total value of more than \$600 Person to Whom You Gave the Gift  Describe the gifts  Dates you gave the gifts  S   |            |  | the second secon | narcon?   |
| Yes, Fill in the details for each gift.   Gifts with a total value of more than \$600 per person   Describe the gifts   Dates you gave the gifts  |            |  | ptcy, did you give any gifts with a total value of more than \$000 per   | person  |
| Gifts with a total value of more than \$600 per person  Person to Whom You Gave the Gift  Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 per person  Describe the gifts  Dates you gave the gifts  S   |            |  |  |   |
| per person  the gifts  Person to Whom You Gave the Gift  S  | <b>)</b> Y | es. Fill in the details for each gift.   |  |   |
| per person  the gifts  Person to Whom You Gave the Gift  S  |            | consequences a conjugate of more than \$600  | Describe the gifts Date  | s you gave  |
| Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$500 per person  Describe the gifts  \$  |            |  |  |   |
| Number Street  City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$500 per person  Describe the gifts  \$  | 1,5        | tive in particular production of the second pr |  |   |
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| City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 Describe the gifts  per person  Dates you gave the gifts  \$   | Pe         | erson to Whom You Gave the Gift  |  | * · · · · · · · · · · · · · · · · · · ·               |
| City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 Describe the gifts  per person  Dates you gave the gifts  \$   |            |  |  | \$  |
| City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 Describe the gifts  per person  Dates you gave the gifts  \$   | -          |  | -  | T   |
| City State ZIP Code  Person's relationship to you  Gifts with a total value of more than \$600 Describe the gifts  per person  Dates you gave the gifts  \$   |            |  | _  |   |
| Person's relationship to you  Gifts with a total value of more than \$500 Describe the gifts  per person  S  \$   | N          | umber Street   |  |   |
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| Gifts with a total value of more than \$500 Describe the gifts The gifts the gifts  S  S  | Ρ          | erson's relationship to you  | _  |   |
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| \$\$  | G          | ifts with a total value of more than \$600   | Pate   | s unu navo Value                                      |
| Person to Whom You Gave the Gift  \$\$  | р          | er person (REALINE REALINE REA | A STATE OF THE STA | J   |
| Person to Whom You Gave the Gift  \$  |            |  |  | ¢*  |
| \$  | -          | arean to Whom You Gave the Gift  | _  | <u>*************************************</u>          |
| <u> </u>  | Р          | disolito whom for days the Ont   |  | _   |
|   |            |  | _  | <u> </u>  |
|   |            |  |  |   |

City

Number Street

Person's relationship to you

State ZIP Code

Ami M Cutrone

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Ami M Cutrone

Debtor 1

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Case number (if known)\_

| saining y hears beinte han men ant naukint  | tcy, did you give any gifts or contributions with a total value   | of more than \$600              | to any charity?   |
|---|---|---------------------------------|-------------------|
| ☑ No<br>☑ Yes. Fill in the details for each gift or con   | ribution.   |                                 |                   |
| Gifts or contributions to charities<br>that total more than \$600   | Describe what you contributed   | Date you contributed            | Value             |
|   |   |                                 | \$                |
| Charity's Name  |   |                                 | \$                |
| Number Street   |   |                                 |                   |
| City State ZIP Code   |   |                                 |                   |
|   |   |                                 |                   |
| 6: List Certain Losses  |   |                                 |                   |
|   | Include the amount that insurance has paid. List pending insurance  |                                 |                   |
|   | Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.   |                                 | <b>\$</b>         |
| List Certain Payments or Tran   | claims on line 33 of Schedule A/B: Property.  |                                 | \$                |
| Within 1 year before you filed for bankrup<br>consulted about seeking bankruptcy or p<br>Include any attorneys, bankruptcy petition pr  | claims on line 33 of <i>Schedule A/B: Property.</i> Insters  Itcy, did you or anyone else acting on your behalf pay or trans  |                                 | s                 |
| Within 1 year before you filed for bankrup consulted about seeking bankruptcy or placed any attorneys, bankruptcy petition provided No  | esfers  tcy, did you or anyone else acting on your behalf pay or transreparing a bankruptcy petition?   |                                 | Amount of payment |
| Within 1 year before you filed for bankrup consulted about seeking bankruptcy or placed any attorneys, bankruptcy petition provided No  | claims on line 33 of Schedule A/B: Property.  Insters  Itcy, did you or anyone else acting on your behalf pay or transfreparing a bankruptcy petition?  Reparers, or credit counseling agencies for services required in yo | ur bankruptcy.  Date payment or | Amount of payment |
| Within 1 year before you filed for bankrup consulted about seeking bankruptcy or plactude any attorneys, bankruptcy petition provided in the details.                                     | claims on line 33 of Schedule A/B: Property.  Insters  Itcy, did you or anyone else acting on your behalf pay or transfreparing a bankruptcy petition?  Reparers, or credit counseling agencies for services required in yo | ur bankruptcy.  Date payment or | Amount of payment |
| Within 1 year before you filed for bankrup consulted about seeking bankruptcy or pilnclude any attorneys, bankruptcy petition private No Yes. Fill in the details.  Person Who Was Paid   | claims on line 33 of Schedule A/B: Property.  Insters  Itcy, did you or anyone else acting on your behalf pay or transfreparing a bankruptcy petition?  Reparers, or credit counseling agencies for services required in yo | ur bankruptcy.  Date payment or | Amount of payment |
| Within 1 year before you filed for bankrup consulted about seeking bankruptcy or pinclude any attorneys, bankruptcy petition provided in the details.  Person Who Was Paid  Number Street | claims on line 33 of Schedule A/B: Property.  Insters  Itcy, did you or anyone else acting on your behalf pay or transfreparing a bankruptcy petition?  Reparers, or credit counseling agencies for services required in yo | ur bankruptcy.  Date payment or | Amount of payment |

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Case number (if known)\_\_\_

|  | Description and value of any property tran   | sferred   | Date payment or transfer was made | Amount of payment      |
|--|--|---|-----------------------------------|------------------------|
| Person Who Was Paid  |  |   |                                   | \$                     |
| Number Street  |  |   |                                   | \$                     |
| **************************************   |  |   |                                   |                        |
| City State ZIP Code  |  |   |                                   |                        |
| Email or website address   | _  |   |                                   |                        |
| Person Who Made the Payment, if Not You  |  |   |                                   |                        |
| No<br>Yes. Fill in the details.  | Description and value of any property trai   |   | Date payment or                   | Amount of paymer       |
| Person Who Was Paid  | Section and a section of the section |   | transfer was made                 | \$                     |
| Number Street  |  |   | <u> </u>                          | \$                     |
| City State ZIP Code  |  |   |                                   | T                      |
| hin 2 years before you filed for bankrup<br>nsferred in the ordinary course of your I<br>ude both outright transfers and transfers n<br>not include gifts and transfers that you hav | business or financial affairs? nade as security (such as the granting of a ve already listed on this statement.  | security interest or mo                             | rtgage on your prop               | erty).                 |
| No   |  |   |                                   | 计二字线电压 化邻环基二十分 电       |
| No<br>Yes. Fill in the details.  | Description and value of property transferred  | Describe any property o<br>or debts paid in exchan  | r payments received               | Date transfer was made |
| No   | Description and value of property  | Describe any property o                             | r payments received               | Date transfer          |
| No<br>Yes. Fill in the details.  | Description and value of property transferred  | Describe any property o                             | r payments received<br>ge         | Date transfer was made |
| No Yes. Fill in the details.  Person Who Received Transfer  Number Street  | Description and value of property transferred  | Describe any property o<br>or debts paid in exchang | r payments received<br>ge         | Date transfer was made |
| No Yes. Fill in the details.  Person Who Received Transfer  Number Street  | Description and value of property transferred  | Describe any property o<br>or debts paid in exchang | r payments received<br>ge         | Date transfer was made |
| No Yes. Fill in the details.  Person Who Received Transfer  Number Street  City State ZIP Code  Person's relationship to you   | Description and value of property transferred  | Describe any property o<br>or debts paid in exchang | r payments received<br>ge         | Date transfer was made |

Ami M Cutrone

Debtor 1

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| Debtor 1 | Ami M Cutrone |             |           | Case number (#known) |
|----------|---------------|-------------|-----------|----------------------|
|          | First Name    | Middle Name | Last Name |                      |

| Date transfer was made  | ] No   |  |  |  |
|---|--|--|--|--|
| Description and value of the property transferred  Date transferwas made  ***Name of trust**  **Description and value of the property transferred  Date transferwas made  ***Name of trust**  **Description and value of the property transferred   |  |  |  |  |
| Description and value of the property transferred   Date transfer was made  | · Too. I in ill die detaile,   | A 2014 FOR THE STATE OF STANKS AND A STANKS  | One had had been the control of the second of the control of the | nnin euska kan kan disebelah bisabili bisabili di kanala da bisabili bisabi |
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| List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units   |  |  |  | gasaras Perind Charles (1997) (1998) made (1997) (19   |
| List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units   | Name of trust  |  |  |  |
| ithin 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, losed, sold, moved, or transferred?  clude checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, rokerage houses, pension funds, cooperatives, associations, and other financial institutions.  No  Yes. Fill in the details.  Last 4 digits of account number  Type of account or Date account was closed, sold, moved, or transferred  Last 4 digits of account number  Type of account or Date account was closed, sold, moved, or transferred  Last balance before closing savings  Name of Financial Institution  XXXX   | rame of gast   |  |  |  |
| ithin 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, losed, sold, moved, or transferred?  clude checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, rokerage houses, pension funds, cooperatives, associations, and other financial institutions.  No  Yes. Fill in the details.  Last 4 digits of account number  Type of account or Date account was closed, sold, moved, or transferred  Last 4 digits of account number  Type of account or Date account was closed, sold, moved, or transferred  Last balance before closing savings  Name of Financial Institution  XXXX   |  |  |  |  |
| ithin 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, losed, sold, moved, or transferred?  clude checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, rokerage houses, pension funds, cooperatives, associations, and other financial institutions.  No  Yes. Fill in the details.  Last 4 digits of account number  Type of account or Date account was closed, sold, moved, or transferred  Last 4 digits of account number  Type of account or Date account was closed, sold, moved, or transferred  Last balance before closing savings  Name of Financial Institution  XXXX   | •  |  | **************************************   |  |
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| osed, sold, moved, or transferred? clude checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, rokerage houses, pension funds, cooperatives, associations, and other financial institutions.    No   | 8: List Certain Financial Acc  | counts, Instruments, Safe Deposit  | Boxes, and Storage Units   |  |
| clude checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, oberage houses, pension funds, cooperatives, associations, and other financial institutions.    No   Yes. Fill in the details.   | ithin 1 year before you filed for bar  | nkruptcy, were any financial accounts o  | r instruments held in your name, o   | or for your benefit,   |
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| Name of Financial Institution    Name of Financial Institution   XXXX-   Checking   Savings   Money market   Brokerage   Other  | clude checking, savings, money m   | arket, or other financial accounts; certi  | ficates of deposit; shares in banks  | s, credit unions,  |
| Yes. Fill in the details.   Last 4 digits of account number   Type of account or instrument   Date account was closed, sold, moved, or transferred   Checking   Savings   Money market   Brokerage   Other  | okerage houses, pension funds, c   | ooperatives, associations, and other fin   | ancial institutions.   |  |
| Last 4 digits of account number  Type of account or instrument  Closed, sold, moved, or transferred  XXXX   |  |  |  |  |
| Last 4 digits of account number   | Yes. Fill in the details.  |  |  |  |
| Name of Financial Institution   |  |  |  |  |
| Name of Financial Institution  XXXX   |  |  |  |  |
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| Number Street    Savings   Money market   | Name of Financial Institution  | WWW.   | Паканыя  |  |
| Money market   Brokerage   Other  |  | xxxx   | <u> </u>   | <u> </u>   |
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| Name of Financial Institution    Name of Financial Institution   Savings   Money market   | Number Street  |  | _ `  |  |
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| Number Street    Money market   Brokerage   Other   Other   |  | ode  | Money market Brokerage   |  |
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| Debtor 1 | Ami M Cutrone |             |           | Casa number (21)       |
|----------|---------------|-------------|-----------|------------------------|
| JUDIOI 1 | First Name    | Middle Name | Last Name | Case number (if known) |

| Yes. Fill in the details.   |  |   |
|---|--|---|
|   | Who else has or had access to it?  | Describe the contents Do you still have it?   |
|   |  | nave (r   |
| Name of Storage Facility  | Name   | No  |
| Name of Storage Pacing  | Name   | LYes  |
| Number Street   | Number Street  |   |
| 4.4.  | CityState ZIP Code   |   |
| City State ZI   | P Code   |   |
|   |  | mana di 🕳 ara ara managamana ara ara ara ara ara ara ara ara ara  |
| Part 9: Identify Property You   | u Hold or Control for Someone Else   |   |
| 23 Do you hold or control any proper  | ty that compone also owns? Include any proper  | ty you harrowed from an atains for  |
| or hold in trust for someone.   | ty that someone else owns? Include any proper  | ty you borrowed from, are storing for,  |
| ✓ No  |  |   |
| Yes. Fill in the details.   |  |   |
|   | Where is the property?   | Describe the property Value   |
|   |  |   |
| Owner's Name  |  | \$  |
|   |  |   |
| Number Street   | Number Street  |   |
|   |  |   |
|   | City State ZIP Code  |   |
|   |  | •   |
| City State ZII  | P Code   |   |
|   | P Code  Invironmental Information  |   |
| Part 10: Give Details About E   | P Code  Invironmental Information  |   |
| Cor the purpose of Part 10, the follow  | P Code invironmental Information ing definitions apply:  |   |
| or the purpose of Part 10, the follows  | invironmental Information Ing definitions apply: eral, state, or local statute or regulation concern   | ning pollution, contamination, releases of  |
| or the purpose of Part 10, the follows Environmental law means any feder hazardous or toxic substances, we  | P Code invironmental Information ing definitions apply:  | ning pollution, contamination, releases of water, groundwater, or other medium,   |
| or the purpose of Part 10, the following Environmental law means any feder hazardous or toxic substances, we including statutes or regulations or   | invironmental Information  ing definitions apply: eral, state, or local statute or regulation concerr astes, or material into the air, land, soil, surface controlling the cleanup of these substances, was  | ning pollution, contamination, releases of<br>water, groundwater, or other medium,<br>stes, or material.  |
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## Case 18-14514 Doc 1-1 Filed 05/18/18 attach correct PDF

Ami M Cutrone

Debtor 1

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Case number (if known)

| riisi Name Middle Name Las   | R Mante  |  |   |                       |
|--|--|--|---|-----------------------|
| 25. Have you notified any governmental unit o  | of any release of hazardous materi   | al?  |   |                       |
| ☑ No   |  |  |   |                       |
| Yes. Fill in the details.  | Governmental unit  |  |   | Date of nation        |
|  | Governmental unit  | Environmental law,   | ii you kilow it   | Date of notice        |
| Name of site   | Governmental unit  | of Parket Combined And   |   |                       |
| Name of Site   | Governmental unit  | ***************************************  | kannandad Sanda anda kannanda ana ana ka Sannanda dha 200 a 20            |                       |
| Number Street  | Number Street  |  |   |                       |
|  | City State ZIP Code  |  |   |                       |
| City State ZIP Code  |  |  |   |                       |
|  |  |  |   |                       |
| 26. Have you been a party in any judicial or ad  | iministrative proceeding under an  | y environmentai iaw  | r include settlements and o   | ders,                 |
| Yes. Fill in the details.  |  |  |   |                       |
|  | Court or agency  | Nature of the o  | ase   | Status of the case    |
| Case title   |  |  |   |                       |
|  | Court Name   |  |   | ☐ Pending ☐ On appeal |
|  | Number Street  |  |   | Concluded             |
|  | VIIII VIII VIII VIII VIII VIII VIII VI   | :  |   |                       |
| Case number  | City State ZIP Co  | de   |   |                       |
| Part (1: Give Details About Your Bu  | isiness or Connections to An   | v Business   |   |                       |
| 27. Within 4 years before you filed for bankru  A sole proprietor or self-employed  A member of a limited liability com  A partner in a partnership  An officer, director, or managing e | in a trade, profession, or other ac<br>pany (LLC) or limited liability part  | tivity, either full-time   |   | ness?                 |
| An owner of at least 5% of the voti  | ng or equity securities of a corpor  | ation  |   |                       |
| ☑ No. None of the above applies. Go to F   |  |  |   |                       |
| Yes. Check all that apply above and fil  | I in the details below for each bus<br>Describe the nature of the busines  | 化氯化二甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基甲基   | Employer Identification number  |                       |
| Business Name  |  |  | Do not include Social Security  | number or ITIN.       |
|  | THE PROPERTY OF THE PROPERTY O | and a second sec | EIN:  |                       |
| Number Street  |  |  | Dates business existed  |                       |
|  | Name of accountant or bookkeeps  | <b></b>  | ्राम्युर्वे स्थापना विकास स्थापना विकास स्थापना विकास स्थापना विकास स्थापना विकास स्थापना विकास स्थापना स्थापन<br>स्थापना |                       |
|  | 12 Productive data and annual  | TOTAL IN THE PARTY.  | From T  | o                     |
| City State ZIP Code  | Describe the nature of the busines   | <b>:</b>   | Employer identification number  |                       |
| Business Name  | # HANDERS OF A PARTY O | 4.8 (1.0 kg (1.0 kg (1.4 kg) (1.0 kg) (1.0 kg) (1.0 kg)  | Do not include Social Security  | number or ITIN.       |
|  |  | PROFILE  | EIN:  | ····                  |
| Number Street  |  | ***  | Dates business existed  |                       |
|  | Name of accountant or bookkeepe  | •  | From  | To                    |

City

State ZIP Code

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Case number (if known)

Describe the nature of the business **Employer Identification number** Do not include Social Security number or ITIN. **Business Name** Number Street Dates business existed Name of accountant or bookkeeper From Тο ZIP Code 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Yes, Fill in the details below. Date issued Name MM / DD / YYYY Number Street ZIP Code Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Ami M Cutrone/ Signature of Debtor 2 Signature of Debtor Date 05/18/2017 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ✓ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ✓ No \_. Attach the Bankruptcy Petition Preparer's Notice, Yes, Name of person\_ Declaration, and Signature (Official Form 119).

Ami M Cutrone

Debtor 1

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| Fill in this in     | formation to ide    | ntify your case:                     |           |
|---------------------|---------------------|--------------------------------------|-----------|
| Debtor 1            | Ami M Cutrone       |                                      |           |
| 200.0,              | First Name          | Middle Name                          | Last Name |
| Debtor 2            |                     |                                      |           |
| (Spouse, if filing) | First Name          | Middle Name                          | Last Name |
| United States E     | Bankruptcy Court fo | or the Northern District of Illinois |           |
| Case number         |                     |                                      | , -····,  |
| (If known)          |                     |                                      |           |
|                     |                     |                                      |           |

#### Official Form 108

### Statement of Intention for Individuals Filing Under Chapter 7

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1: List Your Creditors Who Have Secured Claims

| For any creditors that you listed in Part 1 of Schedule D: C information below.  | reditors Who Have Claims Secured by Property (Official           | Form 106D), fill in the  |
|--|--|--|
| Identify the creditor and the property that is collateral  | What do you intend to do with the property that secures a debt?  | Did you claim the property as exempt on Schedule C7  |
| Creditor's name:   | Surrender the property.  | No   |
| AND SOUTH OF THE PERSON OF THE | Retain the property and redeem it.                               | Yes  |
| Description of property securing debt:   | Retain the property and enter into a<br>Reaffirmation Agreement. |  |
| g  | Retain the property and [explain]:                               |  |
| Creditor's   | ☐ Surrender the property.  | No   |
| name:  | Retain the property and redeem it.                               | □Yes   |
| Description of property securing debt:   | Retain the property and enter into a<br>Reaffirmation Agreement. |  |
|  | Retain the property and [explain]:                               |  |
| Creditor's   | ☐ Surrender the property.  | □No  |
| name:  | Retain the property and redeem it.                               | Yes  |
| Description of property securing debt:   | Retain the property and enter into a<br>Reaffirmation Agreement. |  |
| security desc.   | Retain the property and [explain]:                               |  |
| Creditor's   | ☐ Surrender the property.  | □No  |
| name:  | Retain the property and redeem it.                               | Yes  |
| Description of property securing debt:   | Retain the property and enter into a<br>Reaffirmation Agreement. |  |
| obtaining door.  | Retain the property and [explain]:                               |  |
|  |  | and the same of th |

12/15

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Debtor

Ami M Cutrone

Case number (If known)\_\_

Part 2: **List Your Unexpired Personal Property Leases** 

| or any unexpired personal property lease that you listed in <i>Schedule G: Executory Contracts and Unexpired Leases</i> (Official Form 106G), II in the information below. Do not list real estate leases. <i>Unexpired leases</i> are leases that are still in effect; the lease period has not yet nded. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). |  |  |  |  |
|--|--|--|--|--|
| Describe your unexpired personal property lease  | es Will the lease be assumed?  |  |  |  |
| Lessor's name:   | □No  |  |  |  |
| Description of leased property:  | Yes  |  |  |  |
| Lessor's name:   | □No  |  |  |  |
| Description of leased property:  | □Yes   |  |  |  |
| Lessor's name:   | □No  |  |  |  |
| Description of leased property:  | □Yes   |  |  |  |
| Lessor's name:   | □ No   |  |  |  |
| Description of leased property:  | L∐Yes  |  |  |  |
| Lessor's name:   | □ No   |  |  |  |
| Description of leased property:  | Yes  |  |  |  |
| Lessor's name:   | □No  |  |  |  |
| Description of leased property:  | Yes  |  |  |  |
| Lessor's name:   | □No  |  |  |  |
| Description of leased property:  | Yes  |  |  |  |
| property: art 3: Sign Below  | dicated my intention about any property of my estate that secures a debt and any<br>d lease. |  |  |  |
| Signature of Debtor 1  | Signature of Debtor 2  |  |  |  |
| Date 05/18/2018  | Date   |  |  |  |

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### United States Bankruptcy Court Northern District of Illinois

| In re: | Ami M Cutrone | Case No.  |   |
|--------|---------------|-----------|---|
|        |               | Chapter : | 7 |
|        | Debtor(s)     |           |   |

#### **Verification of Creditor Matrix**

The above-named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

| Date: | 05/18/2018 | Ami M Cutrone             |
|-------|------------|---------------------------|
|       |            | Signature of Debtor       |
|       |            |                           |
|       |            | Signature of Joint Debtor |